



Public Building Commission of Chicago
Professional Services

Requisition for PBC Approval

Project Name: Taylor - Lauridsen Fieldhouse Date: 9-23-08
 Project Location: 704 W. 42nd St. Project Number: 1469, CPD-39
 Owner Agency: Chicago Park District PS Number: PS1423-1
 Project Services: _____ Project Manager: Julie Storch
 Property Ownership: _____

Contract Type:	Request Type:	Pre-Qualified Specialty Services:
<input checked="" type="checkbox"/> New Contract	<input type="checkbox"/> Request for Services (1)	<input type="checkbox"/> Phase I Environmental (Under \$50,000)
<input type="checkbox"/> Existing Contract	<input type="checkbox"/> Suborder under Term Agreement	<input type="checkbox"/> Phase II Environmental (Under \$250,000)
<input type="checkbox"/> Continuation of Previous Service/Work (provide description of previous work completed)	<input type="checkbox"/> Subconsultant Approval	<input type="checkbox"/> Environmental Design (Under \$50,000)
	<input checked="" type="checkbox"/> Request for Services; Utilities/ City Departments	<input type="checkbox"/> Surveying (Under \$50,000)
	<input type="checkbox"/> Request for Services over \$25,000 Requires Board Approval	<input type="checkbox"/> Commissioning (Under \$125,000)
		<input type="checkbox"/> Materials Testing (Under \$150,000)

(1) Note: This Request for Service is governed by the terms and conditions set forth in the "Standard Terms and Conditions for Professional Services for Projects of \$25,000.00 or less", dated February 28, 2001, as amended and incorporated as if fully set forth here by this reference and by any Exhibits or Attachments to this Request for Service. Such Standard Terms and Conditions for Professional Services for Projects of \$25,000.00 or less are available from the PBC's website at: www.pbcchicago.com/submittal/standard.asp.

Vendor Information:

Vendor Name: <u>People's Gas</u>	Phone Number: <u>312-240-4076</u>
Vendor Address: <u>30 E. Randolph Dr. 17th Fl 60601</u>	Contact Name: <u>John Moran</u>
Subconsultant Name (if applicable): _____	<input type="checkbox"/> Please Mail Payment
Subconsultant Services (if applicable): _____	

Scope of Services:	<u>Permanent gas service to new bldg.</u>
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Justification for Selection:	<u>Local service provider</u>
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Budget Code: 02.11 TOTAL: 3,078.⁰⁰

Approvals:

Project Manager: Julie Storch Date: 9-24-08 Executive Director: [Signature] Date: 10/2/08
 Director of Development: [Signature] Date: 10/1/08 Director of Procurement: [Signature] Date: 10/1/08

For Internal Use Only: Received by: DZ Date Received: 10-8-08 / Nov. Bd.