

SAMPLE

An ICE is not completed using quotes; it is completed using estimates from an independent source, other than for this project. Obtaining invoices from previous similar projects or from projects from other systems or agencies is required.

Grantee/Subrecipient local
P.O. #: 12345xxxx

Project Grantee Information:

Grantee/Subrecipient Name: XYZ Transit System

Grantee/Subrecipient Address: 1 S Wilmington St

Grantee/Subrecipient Project Contact Name: Chris Dodson

Title: Procurement Manager

Phone: 919-707-4696

Email: cbdodson@ncdot.gov

Project Description (please provide G-code within description):

G596 – Vehicle Security/Surveillance (Replacement) – 4 cameras per vehicle (15 vehicles total)

Project Detail:

<p>Procurement Type:</p> <p><input checked="" type="checkbox"/> Materials & Supplies <small>(EX: bi-fuel conversion kits, radios, computers vehicle cameras, etc...)</small></p> <p><input type="checkbox"/> Professional Services <small>(typically under Admin/Operating)</small></p> <p><input type="checkbox"/> Architecture & Engineering</p> <p><input type="checkbox"/> Operations & Management <small>(3rd party agreements under Admin/Operating or potentially Capital Cost of Contracting)</small></p> <p><input type="checkbox"/> Construction</p> <p><input type="checkbox"/> Facility</p> <p>Repair/Rehabilitation</p> <p><input type="checkbox"/> Rolling Stock (Bus, Fleet Vehicles, etc.) ONLY USE ICE FORM IF NOT UTILIZING NCDOT VEHICLE CONTRACT</p> <p><input type="checkbox"/> Other:</p>	<p>Date ICE Completed:</p> <p>Procurement Threshold:</p> <p><input type="checkbox"/> Micro Purchase <\$10,000</p> <p><input checked="" type="checkbox"/> Small Purchase \$10,000-\$150,000 <small>(\$90,000 threshold when involving state funds)</small></p> <p><input type="checkbox"/> Request For Proposals (RFP) over \$150,000 (over \$90,000 when involving state funds)</p> <p><input type="checkbox"/> Invitations For Bid (IFB) over \$150,000 (over \$90,000 when involving state funds)</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Sole Source</p> <p><input type="checkbox"/> Piggyback</p> <p><input type="checkbox"/> Non-Competitive Quotation</p>	<p>Estimated Date of Project Completion:</p> <p>Project funding Source:</p> <p><input checked="" type="checkbox"/> State Funding</p> <p><input checked="" type="checkbox"/> Federal Funds <input type="checkbox"/> Local Funds</p> <p><input checked="" type="checkbox"/> Combination of Funding Sources (percentages):</p> <p><input type="checkbox"/> State: 10% _____</p> <p><input type="checkbox"/> Federal: %80 _____</p> <p><input type="checkbox"/> Local: %10 _____</p> <p><input type="checkbox"/> Other: _____</p> <p>Grant Application #: <u>100000xxxxx</u></p>
<p>Project Contact Signature:</p>		

Procurement Costs:

(Report Units **OR** Budget Amount)

<p># of Units: <u>15 (4 camera system per unit)</u></p> <p>Cost per Unit: <u>\$3,000.00</u></p> <p>Total Cost: \$ <u>45,000</u></p>	<p>Estimated Budget:</p> <p>\$45,000.00</p>
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Estimate has been developed as follows (check all that apply):

- Published catalog or price list (attach pertinent catalog or price list pages – copy page and attach).
- Recent prices for the same or similar item/service (identify contracts, purchase orders, sources, and any pertinent documents (i.e.: dates of awards, etc.). _____

It is required that all procurements must submit the ICE and the Solicitation Draft (Scope of Work/RFP/Bid) to the NCDOT-IMD Procurement Unit for approval PRIOR to any solicitation to occur. You will not be in contract compliance if this step is not reviewed and approved prior to solicitation.

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- In-house engineering or technical estimate (see details below).
- Other (specify) _____
- If appropriate, the estimates/prices herein have been made current by adjusting for inflation using the following Producer or Consumer Price Index: _____

Cost Estimate Details. Details for the estimated price/cost identified are shown below (complete Section A or B).

A

Cost of Standard Items				
Vendor/Cost Source	Product	Unit Cost (\$/ea)	Unit Cost (\$/ea)	Notes
		Delivered	No Freight	

B

Cost of Services, Repairs, or Non-Standard Items								
Item/Task:								
Vendor/Cost Source	Materials	Other Direct Costs	Labor (rate, hours)	Labor Class	Allocated Overhead	SG &A	Profit	Total

NOTE: For complex projects or tasks, attach additional supporting documentation, as appropriate.

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