



PURCHASING DIVISION
**PIGGYBACK PURCHASE
 REQUEST FORM**

To ensure transparency and compliance Piggyback purchase requests must be approved in advance and accompanied by appropriate written documentation. This form, along with the required supporting materials, satisfies that requirement.

Purchases up to \$50,000 may be approved by the City Manager. Any purchase exceeding \$50,000 requires Commission approval.

Piggyback contracts are awarded for the full duration of the original agreement and are available for use by all City departments.

Date	11/18/25
Department/Division	Public Works/Solid Waste
Requestor	LeRoy Lewis
Title	Solid Waste Division Manager
Phone	772-467-3826
Email	llewis@cityoffortpierce.com

1. Vendor Information

Requested Vendor Name	Elpex Tiresoles
Address	6101 Orange Ave Fort Pierce, FL
Point of Contact & Title	Rocco Torre
Phone Number	772-464-4211
Email	rtorre@tiresoles.com

2. Contract Information

Awarding Agency	Florida Sheriff's Association
Contract Title and number requesting to piggyback	FSA25-TRS27.0: TIRES
Vendor Name	Elpex Tiresoles
Contract Terms	April 1, 2025 to March 31, 2027 page 79
Copy of the Contract and awarding agency documentation is attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

3. Product/Service being requested (be specific):

Refuse Truck Tire Services: Disposal, valve & installation, Tire Pressure monitoring sensor and installation, Tire Mount and Tire Balance.

4. Detailed description of the product/service's function and purposes:

Refuse Truck Tire Services: Disposal, valve & installation, Tire Pressure monitoring sensor and installation, Tire Mount and Tire Balance.

5. Total cost of the requested product/service: \$ 200,000.00

6. Total estimated annual (fiscal year) cost of requested product/service: \$ 200,000.00

Account number: 4024200-54652

7. Is this product/service covered by a warranty? Yes No

If yes, please attach a copy of the warranty details.

8. Will grant funds be used to pay for the requested product/service? Yes No

If yes, please explain:

[Empty box for explanation]

Note: by signing and returning this form you are verifying and acknowledging that you have reviewed all portions (scope, terms, conditions, pricing, etc.) of the requested contracts(s) and recommend its/their approval based on compliance with the City's procurement requirements and all applicable laws and regulations to the best of your knowledge.

Requestor Signature [Signature]

Date 11/18/25

Department Head Signature [Signature]

Date 1/15/26

The Purchasing Division has reviewed the request and has completed the required due diligence per the Purchasing Ordinances, Section 2-439(a)(5).

The Purchasing Division recommends the following as a piggyback:

PROCUREMENT APPROVAL

Purchasing Agent/Specialist

Name Monica Gonzales

Signature [Signature]

Date 1/16/26

Purchasing Manager

Name _____

Signature _____

Date _____