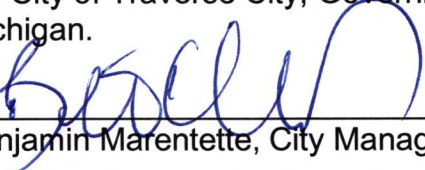


	CITY OF TRAVERSE CITY ADMINISTRATIVE ORDER TITLE: Technology and Facility Purchases	POLICY NO: AO-72
		SUBMITTED BY: Jerry Swanson
		APPROVED BY: Benjamin Marentette
Adopted Date: 08/04/2026 Effective Date: 08/04/2026 Supersedes No:		HISTORY: Initial Adoption Date: 08/04/2026 Amended Date: Amended Date:
I hereby certify that this Administrative Order was authorized by the City Manager for the City of Traverse City, Governmental Center, 400 Boardman Avenue, Traverse City Michigan.		
 Benjamin Marentette, City Manager		8/5/26 Date

I. Purpose:

To establish clear dollar thresholds, standardized procurement procedures, and best practice workflows and to ensure efficiency and organizational coordination for the acquisition of Information Technology (IT) and Facilities-related goods and services. This ensures compatibility with existing infrastructure, long-term sustainability, and fiscal responsibility.

II. Additional Authority

Deputy City Manager, Technology Director, Facilities Manager

III. Scope/Applies to

This order applies to all City departments, offices, and employees seeking to procure hardware, software, telecommunications equipment, building renovations, structural repairs, or specialized maintenance services.

IV. Responsibility

- Department Directors: Responsible for ensuring staff adhere to the limits and "best practice" submission forms outlined herein.
- Technology Director: Responsible for technical vetting and compatibility verification.
- Facilities Manager: Responsible for reviewing upgrades, repair and maintenance of city facilities, structural integrity and building code compliance reviews.
- Purchasing Agent: Responsible for verifying that the required "Prior Approval" documentation is attached to all requisitions.

	CITY OF TRAVERSE CITY ADMINISTRATIVE ORDER TITLE: Technology and Facility Purchases	POLICY NO: AO-72
		SUBMITTED BY: Jerry Swanson
		APPROVED BY: Benjamin Marentette
Adopted Date: 08/04/2026 Effective Date: 08/04/2026 Supersedes No:		HISTORY: Initial Adoption Date:08/04/2026 Amended Date: Amended Date:

V. Definitions/Acronyms

- IT (Information Technology): Includes computers, servers, software (SaaS & On-Premises), networking and telecommunication equipment
- Facilities: Includes structural modifications, HVAC, electrical, plumbing, and fixed assets attached to City-owned property.

VI. Procedures

The attached Technology and/or Facilities Impact form must be completed prior to submitting for approval and purchase.

VII. Statement

Dollar Limits for Prior Approval

To ensure oversight without creating bottlenecks, the following thresholds are established:

<u>Purchase Amount</u>	<u>Approval Required From</u>	<u>Required Documentation</u>
\$0 – \$500	Department Head	Standard Purchase Requisition
\$501 – \$9,000	Technology Director and/or Facilities Manager	Facilities and/or Technology Impact Form
\$9,001 +	City Manager	Administrative Order Compliance Memo
Above City Manager's Spending Authority	City Commission	City Commission Approval

FACILITIES PURCHASE IMPACT AND BEST PRACTICES REVIEW FORM

Reference No.: _____ **Date of Request:** _____

This form must be completed for purchases, projects, or improvements that may affect a City-owned or City-operated facility. The completed form must be attached to the applicable Purchase Order Requisition.

REQUESTING DEPARTMENT INFORMATION

Department: _____

Project Lead/Primary Contact: _____

Phone/Email: _____

Requested Completion or Installation Date: _____

Estimated Cost

Total Estimated Cost: \$ _____

One-Time Cost: \$ _____

Annual or Recurring Cost: \$ _____

Funding Source/Budget Account: _____

PROJECT OR PURCHASE CATEGORY

Check all that apply:

☐ **Mechanical Systems:** HVAC, plumbing, electrical, building automation, or related systems

☐ **Building Improvements:** Building envelope, roofing, windows, doors, interior renovations, upgrades, cabinetry, or fixed assets

☐ **Building Security:** Access-control systems, key fobs, badges, cameras, alarms, locks, or related security equipment

☐ **Life Safety or Code Compliance:** Fire alarms, fire suppression, elevators, emergency systems, accessibility improvements, ADA compliance, or required code updates

☐ **Furniture, Fixtures, or Equipment:** Office furniture, appliances, mounted equipment, or other items that may affect facility operations or building systems

☐ **Other:** _____

PROJECT OR PURCHASE DESCRIPTION

Briefly describe the proposed purchase, project, improvement, or installation, including the location where the work or equipment will be placed:

TECHNICAL REQUIREMENTS AND COMPATIBILITY

Information Technology

Will the proposed item or system connect to the City's network, internet service, software, computers, telecommunications systems, or other technology infrastructure?

- ☐ Yes
☐ No
☐ Unknown—IT review is requested

If yes or unknown, briefly describe the technology requirements:

Facility and System Compatibility

Will the purchase or project require any of the following?

- ☐ Electrical modifications
☐ Plumbing modifications
☐ HVAC modifications
☐ Structural modifications
☐ Wall, ceiling, floor, or roof penetration
☐ Permanent mounting or installation
☐ Utility connection
☐ Access-control or security-system changes
☐ Other facility modifications: _____

If checked, briefly describe:

Vendor and Resource Sharing

Can the proposed item, service, contract, or vendor be used by other City departments or divisions?

- ☐ Yes
- ☐ No
- ☐ Unknown

If yes, identify the departments or potential shared uses:

OPERATIONAL AND LONG-TERM IMPACT

Will the purchase or project result in any ongoing operational requirements?

- ☐ Annual maintenance or service agreement
- ☐ Software, licensing, or subscription fees
- ☐ Replacement parts or specialized supplies
- ☐ Staff training
- ☐ Inspection, testing, or certification requirements
- ☐ Warranty administration
- ☐ Additional custodial or facility maintenance
- ☐ Additional utility usage
- ☐ Equipment replacement or lifecycle costs
- ☐ No anticipated ongoing requirements
- ☐ Other:

Describe any anticipated maintenance, staffing, training, or long-term replacement needs:

JUSTIFICATION AND BEST-PRACTICES ALIGNMENT

Explain why the purchase or project is necessary. Include the operational need, problem being addressed, anticipated benefit, and how the request supports City efficiency, safety, sustainability, accessibility, standardization, or strategic goals.

Alternatives Considered

Describe any alternatives considered, including repairing existing equipment, using an existing City resource, sharing equipment, modifying the scope, or postponing the purchase:

FACILITIES REVIEW

To Be Completed by the Facilities Manager

The proposed purchase or project:

- ☐ Is compatible with existing City facility systems and standards
- ☐ Requires additional technical or professional review
- ☐ Requires permits, inspections, or code review
- ☐ Requires coordination with Information Technology
- ☐ Requires coordination with the City's insurance or risk-management provider
- ☐ Requires competitive bidding, quotes, or purchasing review
- ☐ Requires a maintenance or replacement plan
- ☐ May be suitable for use by additional departments
- ☐ May create unbudgeted installation, maintenance, or lifecycle costs
- ☐ Does not create a significant facility impact

Additional Reviews Required

- ☐ Information Technology
- ☐ Purchasing
- ☐ Finance/Treasurer
- ☐ Risk Management/Insurance
- ☐ Fire Department or Fire Marshal
- ☐ Building Official or Code Review
- ☐ Accessibility/ADA Review
- ☐ City Attorney
- ☐ Other: _____
- ☐ None

Meets City Facility Best-Practice Standards:

- ☐ Yes
- ☐ Yes, with conditions
- ☐ No

City Manager Approval Required:

- ☐ Yes
- ☐ No

City Manager approval is required when the purchase exceeds the applicable administrative approval threshold or when otherwise required by City policy.

FINAL DETERMINATION

Facilities Manager Determination:

- ☐ Approved
- ☐ Approved with Conditions
- ☐ Denied
- ☐ Returned for Additional Information

Conditions, Required Modifications, or Notes

Facilities Manager Name: _____

Signature: _____ **Date:** _____

CITY MANAGER APPROVAL

Complete When Required

- ☐ Approved
- ☐ Approved with Conditions
- ☐ Denied

Comments or Conditions:

City Manager Signature: _____ **Date:** _____

Required Attachment: Attach this completed form and any supporting estimates, quotes, specifications, drawings, photographs, warranties, maintenance agreements, or related documentation to the Purchase Order Requisition.

TECHNOLOGY PURCHASE IMPACT AND BEST PRACTICES REVIEW FORM

Reference No.: _____ **Date of Request:** _____

This form must be completed for all technology-related purchases, software subscriptions, hardware acquisitions, telecommunications equipment, cloud services, and technology projects. The completed form shall be attached to the applicable Purchase Order Requisition.

REQUESTING DEPARTMENT INFORMATION

Department: _____

Project Lead/Primary Contact: _____

Phone/Email: _____

Requested Completion or Installation Date: _____

Estimated Cost

Total Estimated Cost: \$ _____

One-Time Cost: \$ _____

Annual or Recurring Cost: \$ _____

Funding Source/Budget Account: _____

PROJECT OR PURCHASE CATEGORY

Check all that apply:

- ☐ Software as a Service (SaaS)/Cloud Application
- ☐ On-Premises Software
- ☐ Hardware (Desktop, Laptop, Tablet, Mobile Device)
- ☐ Server or Data Center Equipment
- ☐ Network Infrastructure
- ☐ Telecommunications (Phones, Radios, Internet Services)
- ☐ Printers, Scanners, or Peripherals
- ☐ Security Systems or Cybersecurity Software
- ☐ Artificial Intelligence (AI) Application or Service
- ☐ Professional Services or Technology Consulting
- ☐ Software Upgrade or Renewal
- ☐ Other: _____

PROJECT OR PURCHASE DESCRIPTION

Provide a brief description of the proposed purchase or project, including the business need and intended users.

TECHNICAL REQUIREMENTS AND COMPATIBILITY

System Integration

Will this purchase integrate with existing City technology or systems such as BS&A, GIS, ClearGov, Tyler, Microsoft 365, Active Directory, financial systems, or other City applications?

- ☐ Yes
- ☐ No
- ☐ Unknown—Technology review is requested

If yes or unknown, briefly describe the technology requirements:

Network Requirements

Will this purchase require connection to the City's network or internet?

- ☐ Yes
- ☐ No

Will remote access or VPN access be required?

- ☐ Yes
- ☐ No

Security and Compliance

Will this system collect, store, transmit, or process any of the following?

- ☐ Personally Identifiable Information (PII)
- ☐ Criminal Justice Information (CJIS)
- ☐ HIPAA-protected information
- ☐ PCI/Payment Card Information
- ☐ Financial records
- ☐ Employee personnel information
- ☐ Confidential City information
- ☐ None

If applicable, describe: _____

Authentication

Does the system support:

- ☐ Microsoft Entra ID (Azure Active Directory)
- ☐ Single Sign-On (SSO)
- ☐ Multi-Factor Authentication (MFA)
- ☐ Role-based security
- ☐ Audit logs
- ☐ Unknown

Data Management

Will data be:

- ☐ Stored in the Cloud
- ☐ Stored On-Premises
- ☐ Shared with Third Parties
- ☐ Backed Up by Vendor
- ☐ Backed Up by the City

Describe any data retention or backup requirements:

Vendor and Resource Sharing

Can the proposed item, service, contract, or vendor be used by other City departments or divisions?

- ☐ Yes
- ☐ No
- ☐ Unknown

If yes, identify the departments or potential shared uses:

OPERATIONAL IMPACT

Will the purchase require?

- ☐ Technology Department installation
- ☐ Vendor implementation
- ☐ Staff training
- ☐ Annual maintenance agreement
- ☐ Software licensing
- ☐ Ongoing vendor support
- ☐ Hardware replacement plan
- ☐ Additional staffing
- ☐ Additional internet bandwidth
- ☐ New user accounts
- ☐ Other: _____

Describe any ongoing operational requirements:

UTILIZATION AND STANDARDIZATION

Can this solution be used by other departments or divisions?

- ☐ Yes
- ☐ No
- ☐ Unknown

If yes, identify potential users:

Does this purchase replace an existing system?

- ☐ Yes
- ☐ No

If yes, identify the system being replaced:

VENDOR INFORMATION

Vendor Name: _____

Current City Vendor

- ☐ Yes
- ☐ No

Will the vendor require:

- ☐ Remote access
- ☐ On-site installation
- ☐ Software support
- ☐ Access to City data
- ☐ Confidentiality Agreement
- ☐ Security Review

JUSTIFICATION AND BEST-PRACTICES ALIGNMENT

Describe why this purchase is necessary and how it supports the City's operational efficiency, cybersecurity, service delivery, standardization, business continuity, strategic initiatives, or long-term technology plan.

Alternatives Considered

Describe any alternatives considered, including existing City technology, shared licensing, or repair/replacement options.

TECHNOLOGY DEPARTMENT REVIEW

To Be Completed by the Technology Department

The proposed purchase or project:

- ☐ Meets current City technology standards
- ☐ Meets cybersecurity standards
- ☐ Supports existing infrastructure
- ☐ Integrates with existing applications
- ☐ Requires additional licensing
- ☐ Requires additional hardware
- ☐ Requires network modifications
- ☐ Requires cybersecurity review
- ☐ Requires vendor security questionnaire
- ☐ Requires contract review
- ☐ Requires Information Security Agreement
- ☐ Requires additional budget consideration
- ☐ Does not meet current technology standards

Additional Reviews Required

- ☐ Finance/Treasurer
- ☐ Purchasing
- ☐ City Attorney
- ☐ Risk Management
- ☐ Facilities
- ☐ Human Resources
- ☐ Other: _____
- ☐ None

FINAL DETERMINATION

Technology Best Practice Standards

- ☐ Meets Standards
- ☐ Meets Standards with Conditions
- ☐ Does Not Meet Standards

Technology Director Recommendation

- ☐ Approved
☐ Approved with Conditions
☐ Denied

Conditions or Comments

Technology Director : _____

Signature: _____ **Date:** _____

CITY MANAGER APPROVAL

Complete When Required

- ☐ Approved
☐ Approved with Conditions
☐ Denied

Comments or Conditions:

City Manager Signature: _____ **Date:** _____

Required Attachment: Attach the following, as applicable:

- Vendor quote or proposal
- Purchase Order Requisition
- Product specifications
- Technology architecture or implementation documentation
- Security questionnaire or SOC report (if applicable)
- License agreement or subscription terms
- Maintenance or support agreement
- Data privacy or confidentiality agreement
- Any additional supporting documentation

Note: This completed form must be attached to the Purchase Order Requisition before the purchase can proceed through the approval process.