



DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

CONTRACT / GRANT / AGREEMENT REVIEW\*

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_ OTHER \_\_\_\_\_ GRANT\*\* \_\_\_\_\_

DHSMV Contract No.: \_\_\_\_\_ Division: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

Contract Summary: \_\_\_\_\_

Service Location: \_\_\_\_\_

Comments: \_\_\_\_\_

Total Contract Cost/Grant Value: \_\_\_\_\_

Reimbursement Contract: YES NO Term: \_\_\_\_\_

1. Director of Concerned Division:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contract Mgr.: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Finance & Accounting:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fund: \_\_\_\_\_ Org: \_\_\_\_\_

Category: \_\_\_\_\_ Object: \_\_\_\_\_

Comments: \_\_\_\_\_

3. Information Services:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contracts with any IT component must have ISA review.

4. Legal:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\*\*5. Strategic Project Office (Grants)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

6. Chief of Purchasing and Contracts:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

7. Chief of Staff / Executive Director:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*This document must be completed for all contracts or agreements regardless of cost or form. Please contact the Bureau of Purchasing and Contracts for assistance at (850) 617-3203.

\*\*For Grant related approval processing please contact the Strategic Project Office at (850) 617-3145 prior to processing this review form.

To be completed in accordance with s. 287.057(17) FS, and filed along with contract/purchase order upon execution.