

## Non-Competitive Justification Form

**Instructions:** University policy requires that departments use existing agreements or work with Procurement Services to obtain competitive bids for all orders (purchase orders or contracts) totaling \$10,000 or more. Any request to deviate from this policy requires written justification from the requestor to Procurement Services ***prior to issuance of a purchase order or contract.***

Special or unique features may be used as a consideration; however, price, quality and/or delivery terms may not be used as a basis for sole source justification. Sole source requests may not be used for the purpose of expediting a purchase which otherwise would not qualify as a sole source.

### Quick Reference Guide on what is eligible versus not eligible for a sole source purchase:

Eligible for Sole Source	Not Eligible for Sole Source
Only <b>one</b> product or service can meet the department's specific need and the product or service is available from <b>only one</b> source	I have worked with this supplier in the past and liked their work/products
This product or service must be compatible or consistent with past acquisitions (example: must be compatible with existing equipment)	This supplier's pricing is better than other suppliers' pricing or this supplier is offering a discount (price is never a justification for a sole source)
This service involves highly skilled judgement, training, artistic ability, or other attributes whose quality depends on an individual's characteristics and knowledge	This supplier was recommended by a colleague
This supplier is the only one who can provide maintenance services on existing equipment that they manufactured and no one else is certified to provide the maintenance	The product is made by one manufacturer but available through multiple distributors/sources
	The supplier has provided a sole source letter

### Section 1: Basic Information

Date: \_\_\_\_\_ Requisition or Contract Number: \_\_\_\_\_

Name: \_\_\_\_\_ Title and Department: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Department Account #: \_\_\_\_\_

Source of Funding (Federal, State, University, etc.): \_\_\_\_\_

Contractor/Supplier Name: \_\_\_\_\_

Contractor/Supplier Contact Information (Phone/Email): \_\_\_\_\_

### Amendment to an Existing Agreement

If your request is to amend an existing purchase order or contract, please complete the following information.

Existing PO or Contract Number: \_\_\_\_\_

Amendment Start Date: \_\_\_\_\_ Amendment End Date: \_\_\_\_\_

Amendment Amount: \_\_\_\_\_ Total Amount w/ Amendments: \_\_\_\_\_

## Overview of Purchase

In plain language please provide a full description of the product or service that you are requesting to purchase.

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## Section 2: Reason for Sole Source

**Check all that apply and complete the corresponding sections.**

<input type="checkbox"/>	There is only one source for the product or service	Complete Section A
<input type="checkbox"/>	This transaction involves compatibility with existing equipment, technology, software, accessories, replacement parts, or must be utilized to maintain continuity of services	Complete Section B
<input type="checkbox"/>	This service involves highly skilled judgment, training, or artistic ability	Complete Section C
<input type="checkbox"/>	This purchase constitutes an emergency (imminent threat to property or safety)	Complete Section D
<input type="checkbox"/>	Other: this purchase does not fit any of the above criteria	Complete Section E

## Section A: Only One Source for Product or Service

1.	Explain in detail why the product or service is only available from a single source. <b>Explanation must include a statement that the requestor validates this is the only source.</b>
2.	Explain market research efforts that were undertaken to determine this purchase is a sole source.
3.	Is this product being purchased directly from the manufacturer? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO, is it available from more than one source (distributor/dealer)? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, it is available from more than one source, why can this product not be bid?
4.	If there are other suppliers of similar products or services, provide a comparison of key features, specifications, qualifications that clearly distinguishes your selection as the only source of these products/services that will meet your specified requirements.

**Section B: Compatibility**

1.	Describe the existing equipment or service with which this purchase must be compatible; include date of purchase for the existing equipment.
2.	If the requested products or service is essential in maintaining consistency of research or experiments, please explain.
3.	If the requested product/service, part, or accessory is an integral repair part or accessory compatible with existing equipment please explain.
4.	Explain why using another manufacturer or service provider is not possible.

**Section C: Skilled Judgement, Training, Artistic Ability**

1.	Describe how the skill, training or artistic ability of the service provider makes that provider the only one capable of performing the service.

**Section D: Emergency**

1.	Describe the nature of the emergency

**Section E: Other**

If the product or service does not satisfy the requirements of a sole source as outlined in Section 2, please provide a detailed description why this purchase should be considered a sole source.

1.	Other

**Software Products and Services:**

Is the requested product or service for an application software (desktop or local server based) or a hosted software as a service (SaaS)?  Yes  No

If yes, has the Office of Information Technology completed a data and systems security and risk assessment review?

Yes  No

**Certification**

I acknowledge the University's requirements for soliciting competitive bids for purchases over \$10,000 and the criteria for justification for Sole Source purchases, and affirm that there is no actual or potential conflict of interest ([F10125](#)) involving the requested vendor.

Requestor Name and Title	Date	Signature
_____	_____	_____
<b>Division Head</b>	<b>Date</b>	<b>Signature</b>
_____	_____	_____
<b>Division Vice Chancellor</b>	<b>Date</b>	<b>Signature</b>
_____	_____	_____
<b>Chief Business Officer</b>		<b>Signature</b>
_____	_____	_____