

# Single Source/Sole Source Justification Form

Complete this form for contracts with a value greater than \$25,000 (for all funds) where competition may be restricted or where multiple proposals were not obtained. Completing this form does not guarantee that the proposed vendor will be selected. The Office of Facilities Contracts may require additional information. It is the requestor's responsibility to provide all the required information and documentation indicated on this form.

**Definitions:**

*Sole Source-The **ONLY** known source for unique products & services with no other options available*

*Single Source-Circumstances dictate use of this vendor despite other potential options. (i.e availability, timeliness, locality, etc...)*

*This completed form is required to be submitted with the Contract Request Form along with any additional supporting documentation.*

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Requesting Department Name \_\_\_\_\_

Vendor Name \_\_\_\_\_

**A: Explanation for Single/Sole Source**

Select one or more of the following statements (check the box) to support why the contract request attached and noted above should be a single/sole source purchase. **ANY** selection requires explanation in the additional space provided.

1. Items sold through vendor only; no other comparable vendor available.
2. Must match existing piece of equipment. Available only from the same source of original equipment.
3. Upgrade to existing system. Available only from the producer of this system who sells on a direct basis only
4. Repair/Maintenance service requires expertise in operations on unit. Necessary parts unavailable from any source except original equipment manufacturer or their designated servicing dealer.
5. Service(s) provided by the vendor are unique and therefore competitive bids are not applicable as clearly detailed below.
6. Other vendors available, but do not meet end user requirements as clearly detailed below.
7. Competitive bidding is possible but will not yield value for reasons clearly defined below.
8. Other reason.

Explanation for section (A) is required for ANY selected statement. Information provided might include research performed or subject matter expertise detailed to justify the use of this particular vendor. This must clearly indicate why the proposed vendor is the ONLY vendor that will meet your requirements. (Please attach documents if additional space is required)

End user explanation:	Facilities Contracts Attestation: I agree with the explanation provided for the following reason(s).
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B: Establishment of the Reasonableness of the Price

Select one or more of the following statements (check the box) to indicate why you feel the accepted non-competitive price was fair and reasonable. ANY selection requires explanation in the additional space provided.

- 1. The quoted prices compare favorably to market prices, or to previous prices obtained and found to be fair and reasonable, which were paid for the same or similar items on:

(Date) \_\_\_\_\_ (Contract No.) \_\_\_\_\_

- 2. The vendor has certified that the prices offered are equal to or lower than those offered to any government agency or private institution for both like items/services and quantities. (Includes published educational discounts)
- 3. Independent sources indicate that this price is reasonable (i.e. Public Contracts, etc.)
- 4. Other reason.

Explanation for section (B) is required for ANY selected statement. Information provided might include a catalog price page, pricing for similar products or other price comparison information gathered to justify price reasonableness.

Please attach any additional justification information that would support the above explanations.

I certify that to the best of my knowledge I have investigated and found that the above reasons and explanations justify this contract request as a single/sole source procurement, and that price reasonableness is adequately confirmed. I am the individual who has gathered and provided this detailed information and any further questions regarding these details can be directed to my attention.

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

Print Name \_\_\_\_\_ Title \_\_\_\_\_

E-mail address \_\_\_\_\_ Phone # \_\_\_\_\_

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Facilities Contracts Attestation:

Justification appears appropriate.

Justification appears inappropriate. Department representative has been advised the status of the order. Explanation is attached.

Facilities Contracts Approval \_\_\_\_\_ Date \_\_\_\_\_