

## Request for Consideration of Sole Source or Proprietary Purchase

---

This form is designed to assist the faculty and staff in relating the information required in the processing of requisitions for sole-source/proprietary purchases in accordance with Section 2155.067 of the Government Code (Chapter 2155). Please complete Sections 1 and 2 on this form and forward the completed form to the Purchasing department, OCB 1.160. If more space is needed, please attach additional pages.

***The completed form must be approved by the Purchasing Department for requests over \$5,000 to be granted a sole-source/proprietary designation.***

The cornerstone of governmental purchasing is the competitive bidding process. It is the use of this process that keeps the University from paying more than is necessary for goods and services. The Purchasing Department recognizes that for certain goods or services, the generation of competition for a single purchase may not be possible. In that event, the Purchasing Buyer must understand, or come to understand the unique characteristics of the request or need before a Sole Source/Proprietary designation can be applied. Answering completely the questions listed below will assist the Purchasing Buyer in determining whether or not a competitive purchase opportunity exists.

Date:	Purchase Order Number:
Administrative Contact:	
Administrative Phone:	
Requestor of Goods/Service or Primary User:	
Estimated dollar amount of purchase: \$	

### **SECTION 1**

1. Explanation of need/request (General): Provide a high level description of the purpose/need for the good or service?

**OEM: This purchase order is issued to encumber funds for the payment of maintenance and service for equipment by the manufacturer or manufacturer's authorized representative/dealer.**

## Request for Consideration of Sole Source or Proprietary Purchase

2. Explanation of specific need/request: Provide a description of specific features or characteristics required with this request. **The description should include which part or parts of the stated specifications restricts the request to this particular manufacturer/provider.** *(NOTE: The explanation of need “MUST” address the critical importance of the unique feature (s) or characteristic(s) as it applies to its intended use in your operation)*

**To maintain factory warranty coverage it is typical that OEM’s require P.M.A. and/or routine maintenance/service be performed by authorized factory trained service technicians. This includes the installation of any needed repair/replacement parts.**

3. Reason Why Competing Products are not Satisfactory: Provide a brief statement in reference to the identification of other sources that have been reviewed (Include the name, model number, and manufacturer of the similar but not comparable product(s) that have been investigated) and state the reason why competing product(s) are not satisfactory and will not meet the needs for its intended use in your operation. **If quotes from other vendors were obtained or are mentioned below, be sure to attach copies.**

**Due to the technical complexity of this equipment, it requires factory service personnel who are trained and experienced in the service and maintenance of the equipment. Availability of repair and/or replacement parts from the supplier is essential. In most cases, the availability from the manufacturer or authorized manufacturer representative is immediate.**

4. Specific Impact on Department: Provide a statement regarding the specific impact on the Department if the goods or services were procured elsewhere.

**Maintenance services provided by agents other than authorized factory trained/certified personnel may void the warranty. Additionally the equipment may not function per factory specifications thereby potentially rendering experiments inaccurate and/or invalid.**

PO# \_\_\_\_\_

**SECTION 2**

**CONFLICT OF INTEREST STATEMENT**

I, \_\_\_\_\_, the undersigned, hereby certify that the following statements are true and correct and that I understand and agree to be bound by the commitments contained herein.

I am acting on my own accord and am not acting under duress. I am not currently employed by, nor am I receiving any compensation from, nor have I been the recipient of any present or future economic opportunity, employment, gift, loan, gratuity, special discount, trip, favor, or service in connection with this vendor in return for favorable consideration of this request.

\_\_\_\_\_  
Name of Primary User

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

PO# \_\_\_\_\_

Purchasing Department Use Only

---

**SECTION 3**

**DETERMINATION OF SOLE SOURCE BY THE BUYER**

Having reviewed this request for a sole source, I have made the following determination:

\_\_\_\_\_ Sole Source

\_\_\_\_\_ Best Value

\_\_\_\_\_ Proprietary Purchase

\_\_\_\_\_ Not Approved

Rationale for Determination or Additional Comments (REQUIRED):

Buyer's Name (Print): \_\_\_\_\_ Title \_\_\_\_\_

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

PO# \_\_\_\_\_

Purchasing Department Use Only

---

**SECTION 4**

**APPROVAL**

NOTE: This purchasing officer must be authorized to approve the dollar amount of the purchase as listed on Page 1 by the requestor.

\_\_\_\_\_ Approved

\_\_\_\_\_ Not Approved

Additional Comments/Supporting Determination of Approver:

Approver's Name (Print): \_\_\_\_\_ Title \_\_\_\_\_

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