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**Office of Procurement**

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|  | **SOLE SOURCE OR PROPRIETARY PURCHASE** |  |

(Non-Competitive Negotiation)

Item(s) listed below (has/have) been determined to be a: [ ] Sole Source Procurement or

[ ] Proprietary Procurement, and falls within one or more of the established criteria for such purchase(s) indicated below:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item Description** | | | **Qty** | **Unit** | | **Cost** |
| **TOTAL:** | | |  |  | |  |
| **Purchase Requisition No.:** | **Account No.:** | **Department:** | | | **Telephone:** | |

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| --- | --- | --- | --- | --- | --- |
| **Reason(s) for Sole Source/Proprietary Procurement:** | | | | |  |
|  |  |  |  |  | |
| 🞎 The vendor possesses exclusive and/or predominant capabilities and the item(s) contain a patented feature providing superior utility not obtainable from similar products.  🞎 The product or service is unique and established as one of a kind.  🞎 The program requirements cannot be modified so that competitive products or services may be used.  🞎 The product is available from only one source and not merchandised through wholesalers, jobbers, or retailers. | |  | 🞎 Item(s) must be interchangeable or compatible with in-place items.  🞎 The cost of conversion, including, but not limited to, disruption, re-training, and replacement precludes bidding competitively.  🞎 The product is to be used in an instructional setting and the intent is to provide instruction on the specific product or diversity of products.  🞎 Written explanation submitted by the Requisitioner (attached).  🞎 Other justification (documents attached). | | |

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| **Comments**: | |  |  |
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**APPROVING AUTHORITY**

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| Approved: | Title: Director of Procurement Services | Date: |

Enclosure(s)