

SOLE SOURCE APPROVAL REQUEST

Sole source purchases are those which are limited to a single source of supply and involve special/unique situations, such as special facilities, instruments, services, etc. Sole source purchases are normally not allowed except when based on operational compatibility with existing equipment, reliance on existing stock of parts or service agreements, or reliance upon a unique and cost effective feature or functionality.

Name of Requestor:	
Department / College:	
Requested Vendor:	
Vendor ID Number (Banner) & past PO #s, if existing:	
Cost Estimate:	

Please describe the item, its function, and/or scope of work being purchased:	
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This is a Sole Source because:

<input type="checkbox"/>	Sole provider of a licensed or patented good or service
<input type="checkbox"/>	Sole provider of items that are compatible with existing equipment, inventory, systems, programs, or services
<input type="checkbox"/>	Sole provider of goods and services for which the University has established a standard <i>(Procurement of such items for which the University has established a standard by designating a brand or manufacturer or by pre-approving via testing shall be competitively bid if there is more than one vendor for the item.)</i>
<input type="checkbox"/>	Sole provider of factory authorized warranty service
<input type="checkbox"/>	Sole provider of goods or services that will meet the specialized needs of the University or perform the intended function (please detail below or in an attachment)
<input type="checkbox"/>	The vendor is a holder of a used item that would represent good value and is advantageous to the University. <i>(Please attach information on cost of new versus used price, appraisal of value, availability, etc.)</i>
<input type="checkbox"/>	Other – please specify:

<p>What necessary features/attributes does this vendor provide which are not available from other vendors? Please be specific.</p>	
<p>What steps were taken to verify that these features/attributes are not available elsewhere?</p>	
<p>If other vendors were contacted, please list vendor name, email, and person contacted and explain why these were not suitable.</p>	

Requestor:	Department Head/Chair:
Signature:	Signature:
Date:	Date:

<p>If purchase is between \$10,000 and \$150,000: Director of Purchasing</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Not Approved</p> <p>Signature:</p>	<p>If purchase is \$150,000 or more: Associate Vice President of Finance</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Not Approved</p> <p>Signature:</p>
Date:	Date:

If the Sole Source is not approved above, the reasons are as follows (to be populated by the Director of Purchasing or the Associate Vice President of Finance):