



## Request for Sole Source or Single Source Purchase

### Purchasing Department Non-Competitive Request Form

► Date \_\_\_\_\_

► Requesting Department: \_\_\_\_\_

► Department Head: \_\_\_\_\_

► Budget Unit Manager: \_\_\_\_\_

► **Approved TouchPoint Requisition/Blanket Number** \_\_\_\_\_

► **Amount** \_\_\_\_\_

### Instructions:

- Request for a sole source or a single source purchase must be in compliance with BOE Policy DJE, Exceptions to Competitive Selection.
- The purpose of this form is to certify conditions and circumstances for the purchase of goods and services under the sole source or single source exception to the competitive process.
- Use this form for a Non-Competitive Sole Source or a Non-Competitive Single Source Request for Capital and Non-Capital Projects.
- Complete the Section for a SOLE SOURCE or SINGLE SOURCE Request
- This completed request must be signed by the Requesting Department Head and the Budget Unit Manager
- Completed request form and all requested documentation must be attached to the approved TouchPoint requisition. Note: Items with a total cost of \$100,000.00 or more require prior Board approval. The Purchasing Manager must also pre-approve the sole or single source purchase request.
- **Note:** A Sole Source or Single Source designation is valid for requisition/purchase order associated with the request.

# COMPLETE THIS SECTION FOR A SOLE SOURCE REQUEST

## Request for Sole Source Purchase

Sole Source- The required goods or services can only be obtained from one source in the marketplace. Such goods or services will usually be of a unique nature and have performance characteristics that can only be obtained from that source. Written documentation of such determination, in a manner prescribed by the Superintendent or the Superintendent's authorized designee, shall be maintained in the project and/or contract files. For capital improvement projects, specified equipment and materials of a proprietary nature will be identified and submitted to the State DOE Receiving State Capital Outlay Funds 160-5-4-.16(a)(8). (*Board Policy Purchasing DJE – III. Competitive Selection; D. Exception to Competitive Selection, 3. b.)*

### The following written documentation is required and must be attached to Approved TouchPoint Requisition

1. Explanation on **supplier's stationery** stating that the good or service is **only** available from vendor.
2. Statement from DCSD requisition initiator and budget unit manager describing in detail the reason(s) why the supplier is a sole source and the necessity to make the purchase. Please explain why the sole source good or service is the only method that can satisfy the requirements; and include specifics regarding specifications, features, characteristics, requirements, capability and compatibility. Additionally, explain why alternatives are not acceptable.
3. Explain the impact to the District or public if this request is not approved.

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4. Detailed Description of Sole Source Good or Service to be purchased

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5. Name of Sole Source Vendor: \_\_\_\_\_

6. Conditions and special circumstances for Sole Source must be specifically stated. Complete the following:

A. Manufacturer \_\_\_\_\_ (Provide manufacturer's letter, if applicable.)

B. Manufacturer's Authorized Distributor \_\_\_\_\_

C. Manufacturer's Authorized Distributor for Region \_\_\_\_\_

D. Copyright (©) Yes \_\_\_\_\_ No \_\_\_\_\_

E. Registered Trademark (®™) Yes \_\_\_\_\_ No \_\_\_\_\_

F. Trade Secret Yes \_\_\_\_\_ No \_\_\_\_\_

G. Proprietary Information Yes \_\_\_\_\_ No \_\_\_\_\_

H. Other Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

I. Additional Comments: \_\_\_\_\_

- J. Will this purchase obligate DCSD to a particular vendor for future purchases, either in terms of maintenance or a need to purchase more like items in the future to match this one?

Yes \_\_\_\_\_ No \_\_\_\_\_

- K. Is all requested documentation attached to the Approved Requisition?

Yes \_\_\_\_\_ No \_\_\_\_\_

Purchasing Department Use:

Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_

# COMPLETE THIS SECTION FOR A SINGLE SOURCE REQUEST

## Request for Single Source Purchase

Single Source- The required goods or services can only be obtained from one source among others in a competitive marketplace for a substantial reason such as compatibility or standardization provided a reasonably diligent search has been made for other vendors **(additional quote)** or other appropriate information has been obtained to determine a vendor's single source status. **Written documentation** of such determination, in a manner prescribed by the Superintendent or the Superintendent's authorized designee, shall be maintained in the project and/or contract files. For capital improvement projects, specified equipment and materials of a proprietary nature will be identified and submitted to the State DOE Receiving State Capital Outlay Funds 160-5-4-.16(a)(8). (*Board Policy Purchasing DJE – III. Competitive Selection; D. Exception to Competitive Selection, 3. c.)*)

### The following written documentation is required and must be attached to Approved TouchPoint Requisition.

1. Statement from DCSD requisition initiator and budget unit manager describing in detail the reason(s) why the supplier is a single source and the necessity to make the purchase. Please explain why the single source good or service is recommended to satisfy the requirements; and include specifics regarding specifications, features, characteristics, requirements, capability and compatibility. Additionally, explain why other suppliers or alternatives are not acceptable.
2. Explain the impact to the District or public if this request is not approved.

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3. Detailed Description of Single Source Good or Service to be purchased

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4. Name of Single Source Supplier: \_\_\_\_\_

5. Conditions and special circumstances for Single Source must be specifically stated. Complete the following:

- |                            |           |          |
|----------------------------|-----------|----------|
| A. Standardization         | Yes _____ | No _____ |
| B. Warranty                | Yes _____ | No _____ |
| C. Function, compatibility | Yes _____ | No _____ |
| D. Chemical make-up        | Yes _____ | No _____ |
| E. Exclusivity             | Yes _____ | No _____ |
| L. Other                   | Yes _____ | No _____ |

Explain: \_\_\_\_\_

- M. Additional Comments: \_\_\_\_\_

- N. Will this purchase obligate DCSD to a particular vendor for future purchases, either in terms of maintenance or a need to purchase more like items in the future to match this one?

Yes \_\_\_\_\_ No \_\_\_\_\_

- O. Is all requested documentation attached to the Approved Requisition?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Purchasing Department Use:**

Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

**Comments:** \_\_\_\_\_