

# Appendix A: Sole Source Procurement Request

## Sole Source Procurement Request Submit to: Department of Procurement Services

Department:                      Contact Person:                      Phone:

Description of Product/Service:

RQ Number:                      Estimated amount of this purchase \$                      Vendor:

Desired start/delivery date:

In accordance with the Procurement Manual, Chapter Two, Section 2.6, provide the following information in order to document the sole source request.

- 1. Explain why the product/service requested is the only product/service that can satisfy your requirements and explain why alternatives are unacceptable. Be specific with regard to specifications, features, characteristics, requirements, capabilities and compatibility. Describe what steps have been undertaken to make this determination.*
- 2. Explain why this service provider, supplier, or manufacturer is the only practicably available source from which to obtain this product or service and describe the efforts that were made to verify and confirm whether, or not, this is so. (Obtain and attach a letter from the manufacturer confirming, claims made by distributors of exclusive distributorships for the product or service, if, that is cited as a reason for this Sole Source.)*
- 3. Describe the result of your negotiation efforts with the vendor to obtain the best possible price (i.e., vendor's initial offer versus final offer).*
- 4. Explain why the price for this product or service is considered to be fair and reasonable. Provide documentation to support the fair and reasonable pricing.*
- 5. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?)*
- 6. Explain the consequence(s) to the County or Public, including a dollar estimate of the financial impact, if this Sole Source is not approved.**

7. **Funding/Budget Source:**                            Operating                            Enterprise  
    (check all that apply)                            Capital                            Grant  
         Other: \_\_\_\_\_

**8. Provide a sentence that addresses the funding source for this procurement that is appropriate for the Recommendation/Staff Recommended Motion section of the Agenda Item at the time of award (per A.D. 04):**

**9. Advertising Index/Subobject Code:**

**10. This procurement  is  is not related to one or more of the Board's strategic goals. If so, which:**

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I hereby request that a Sole Source be approved for the procurement of the above statement of work, material, equipment, commodity, or service.

\_\_\_\_\_  
Department Director's Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date