

Check One:
No Substitute
Sole Source

SOLE SOURCE/NO SUBSTITUTE FACT SHEET AND CHECKLIST FOR SUPPLIES AND SERVICES

This form must be completed, signed and submitted to the Purchasing Department when making sole source and no substitute requests for supplies. All items must be completed for sole source requests. For no substitute requests, complete items marked with an *. If a question is not applicable, please indicate N/A. Use layman's terms and avoid jargon and the use of acronyms.

*Department:

*Purchase Requisition No.:

*Estimated Total Dollar Amount of Order/Contract:

Contractor's Name:

Contractor's Address:

Contractor's Vendor Number:

Contractor's Contact Person:

Contractor's Contact Telephone No.:

Location Where Supply is to be Delivered:

1. Please check the reason(s) for this request:

- Only Single contractor is capable of providing supplies, service, or construction.
- A federal or state statute or federal regulation exempts the supplies from the competitive procedure.
- It is clearly not feasible to award the contract for supplies on a competitive basis.
- The services involve repair, modification, or calibration of equipment and they are to be performed by the manufacturer of the equipment or by the manufacturer's authorized dealer, provided the contracting officer determines that bidding is not appropriate under the circumstances.
- The contract for the supplies or services is in the best interest of the Commonwealth.

*2. Briefly describe the supply you are requesting and its function, and the unique features/ compatibility of the supply that precludes competitive procurement.

3. What research has been done to verify the contractor as the only known source?

*4. Does the contractor have any distributors, dealers, resellers, etc., that sell the supply?

Yes. Please attach a list of known sources.

No.

*5. Must this supply be compatible with present inventory/equipment, is it an upgrade or an addition to an existing supply, or is it in compliance with the manufacturer's warranty or existing service agreement? If yes, please explain and indicate how it was procured in the past.

*6. What are the future consequences of the procurement? That is, once this procurement is approved and processed, what additional upgrades, additions, supplies, services, etc., are anticipated/projected over the useful life of this item?

*7. What are the consequences of not procuring this specific supply?

8. If timing is a factor, who established the time frame and why?

*9. List any other information relevant to the acquisition of this supply (attach additional 8-1/2" x 11 sheets, if necessary).

Person Completing Form:

Signature: _____

Print Name: _____

Title: _____

Date: _____

Certification of Posting:

I certify this proposed sole source justification has been posted on a publicly accessible website for public comment for a minimum of seven (7) calendar days as required by 62 Pa.C.S. 106.1(b)(5).

Signature of Contracting Officer

Date: _____

Print Name

Date: _____

Approval:

For the Office of the Chancellor:

Signature

Date: _____

Print Name

Date: _____

Approved as to Procurement Method:

Signature of State System of Higher Education Legal Counsel

Date: _____

Print Name

Date: _____