



## Sole Source Justification Request Form

**This form must be completed and accompany any requisition of \$10,000 or more if the vendor is not selected through a competitive quoting / bidding process.**

The requisitioner should be able to document a thorough and equitable evaluation of alternatives that have been made. Special or unique features may be used as a consideration; however, price, quality and/or delivery terms may not be used as a basis for sole source justification. Sole source requests may not be used for the purpose of expediting a purchase which otherwise would not qualify as a sole source.

**NOTE:** Sole source justifications are to be supported by factual statements that will pass an internal or Federal audit. It is the salient features of a product/service that make it a sole source. Sparse or incomplete information will require greater investigation by Procurement Services and will result in a less expedient resolution to your needs. The more relevant information you include in each section, the better.

### A Quick Reference Guide on What is Eligible vs. Not Eligible for Sole Source Purchase:

Eligible for Sole Source	Not Eligible for Sole Source
This vendor is the only vendor that can manufacture or provide this specific product that meets the requirements	I have worked with this vendor in the past and liked their work
This service provide is the only vendor that can provide the service needed during the time frame specified	This vendor provides a great discount (Price is never a justification for a sole source)
This consultancy is the only one with the unique mix of experience and knowledge / skill set that can provide the service needed in the timeframe	I was recommended to use this vendor by a fellow researcher
This vendor is the only one who can provide maintenance services on this piece of equipment that they manufactured, no one else is certified to do so	A product that is made by one manufacturer but sold through many distributors

### Section 1: Basic Information

Date: \_\_\_\_\_ Requisition Number: \_\_\_\_\_  
 Requestor Name \_\_\_\_\_ Title and Department \_\_\_\_\_  
 Phone # \_\_\_\_\_ Email Address \_\_\_\_\_  
 Contractor/Supplier Name \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Contractor/Supplier Contact Information (Phone/Email) \_\_\_\_\_  
 Source of Funding (Federal, State, University, etc.) \_\_\_\_\_

What are you buying? Please provide a full description of the goods or services that you want to purchase from the contractor/supplier named above.

For equipment or supplies provide Manufacturer: \_\_\_\_\_ and Model # \_\_\_\_\_

## Section 2: Case for Sole Source Purchasing

Please select at least one valid condition from the list below to justify the rationale for Sole Source Purchasing. **All fields MUST be completed. Price is NEVER a valid sole source justification.**

- The item/service is available only from a single source;
- The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;
- The Federal awarding agency or pass-through entity expressly authorizes non-competitive proposals in response to a written request from the non-Federal entity (the requestor will need to contact [OSRP](#) to obtain documentation from the awarding agency if the agency provided such approval); or
- After solicitation of a number of sources, competition is determined inadequate.

Provide a description of how your investigation was conducted and how you determined your request may be a sole source (Internet research, publications, market evaluation, consultations, etc.). List all sources identified and investigated to determine that no other source exists for similar products capable of meeting requirements.

Provide a description of features or capabilities **unique** to the vendor/brand being requested as it relates to your program and/or project requirements.

If there are other suppliers of similar goods or services, provide a side-by-side comparison of key features/specifications/qualifications that clearly distinguishes your selection as the ***only*** source of these goods/services that will meet your specified requirements. Additional sheet may be provided if necessary.

List below the names of each individual who was involved in making this sole source purchase recommendation.

**Section 3: Certification and Signature**

Please note that this certification is required to ensure compliance with Federal and State Law. Review it carefully before signing.

- 1. I certify that neither I, nor my cohabitating partner, nor any member of my immediate family, nor a business with which I or any of these individuals, am/are associated, a) has a financial or other interest in this vendor or b) will derive a monetary gain or other tangible personal benefit as a result of the proposed contract with this vendor.
- 2. I certify, to the best of my knowledge, no other person associated with this sole source has a conflict of interest.

\_\_\_\_\_  
Signature\*

\_\_\_\_\_  
Printed Name and Title\*

\_\_\_\_\_  
Date

*\*must be Principal Investigator, Department Chair, Director, or the individual making the vendor selection.*