## **BOISE STATE UNIVERSITY** Request for Bidding Exemption for Sole Source (Purchase Request Estimate is \$10,000 or Greater)

To:	Director of Procurement and Vendor Services – Alicia Dillon		
Reques	equestor Name: Department:		
Reques	est for the Purchase of:		
Reques	ested Vendor:	Cost Estimate: \$	
Requisi	sisition #: Grant Proposal #: OFC	Award #	
If th	<ul><li>□ Veteran-Owned</li><li>□ Service-Disabled Vet-Owned</li></ul>		
Director Vendor operation	e State University Purchasing Policy #6130, Section IV states the stor may waive the competitive bid process on a request by a lor. Sole source purchases are normally not allowed except whe ational compatibility with existing equipment and related parts or rement.	department to restrict a purchase to one potential n based upon strong technological grounds such as	
shall be other u	source purchases are defined as clearly and reasonably limited to be limited to those specific instances that are justified to sat unique circumstances where only one Vendor possesses the unct or service requirement.	isfy compatibility, technical performance needs, or	
or manu Bidder of since the 1. This	urements of products/services for which the requesting department anufacturer or by pre-approving via a testing does not justify a sole or Offeror for the item(s). Rather, this is a sole product or branch there is more than one potential Vendor of the item.**  This is a sole source (only one Vendor possesses the unique and ce requirements) because:	e source purchase if there is more than one potential d-name-only request which shall be competitively bid	
	Sole provider of products/services for which the Department h  **Procurements of items for which the Department has established a approving via testing shall be competitively bid if there is more than or	standard by designating a brand or manufacturer or by pre-	
	☐ Sole provider of a licensed or patented product/service		
	$\square$ Sole provider of items that are compatible with existing equipm	nent, inventory, systems, programs or services	
П	☐ Sole provider of factory-authorized warranty service		
	<u> </u>	,	
	☐ Sole manufacturer and distributor (attach manufacturer's letter	to this effect)	

## question by number 2. Describe the product/service you wish to purchase and its function: 3. What required features/functionality does this product/service provide which are/is not available with other products/services? Please be specific. 4. What steps were taken to verify that these features are not available elsewhere? Other brands/manufacturers were examined (List phone numbers and names, and explain why these were not suitable). ☐ Other Vendors were contacted (List phone numbers and names, and explain why these were not suitable). 5. What is it about this product/service that makes it unique? (Patents/copyrights, need compatibility with existing—why? Space constraints, must match equipment with another agency or department, consequences if this were put out for bid, etc.) 6. What steps were undertaken to determine that this is the only product/service that will meet the particular needs? (Professional opinions/correspondence, trade publications, trade shows, visits to, or correspondence with, other institutions that have installed the same product, site visitations, etc.) Include phone numbers, contact names, dates, and attach quotes where applicable. 7. Will this purchase tie 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 then need more "like" items in the future to match this one?)

Please answer each of the following questions in detail. Use a separate sheet if necessary, referencing each

8. Will this pur and for how lor		articular Vendor for software and or software maintenance? (Doe	s it need to be renewable
the best interes	dation for sole sou st of the University	rce is based upon an objective review of the product/service requipme. My personal familiarity with particular brands, types of equipment request to sole source this purchase when there are other Ven	nt, materials or firms has
compromising	onflict of interest	on my part or personal involvement in any way with this request in place. I certify that no personal advantage will accrue to make is procurement.	
I am aware B supporting stat	ements are compl	asing Policy requires procurements (exceeding \$10,000) to be ete and accurate, based on my professional judgment and investine or a similar product/service.	
Requester Sign	nature	Requester Printed Name	Date
		orudent judgement in evaluating the value of exercising bid exempti asing Policy exemption is in the best interest of Boise State Unive	
☐ Approved	□ Rejected	Procurement and Vendor Services Department Buyer	Date
☐ Approved	□ Rejected	Alicia Dillon, Director of Procurement and Vendor Services	 Date