

Alternate Procurement Request

Questions about this form? Please call 701-774-4250

A complete copy of the policy can be found here: SBHE Policy 803.1 Requestor: Phone #: Fax #: E-Mail:_____ Procurement Type: Sole Source Emergency Discount purchase under group alliance or consortium Description of Commodity or Service: Describe the intended purpose. Provide a vendor name, manufacturer, model #, general description and other identifiers. Purpose: Describe the intended application(s) of the item(s) or service. Total Cost: Include all options for renewal or extension. Will this purchase limit the ability of other vendors to compete on future purchases? Such as supplies, upgrades or replacements. O Yes If YES, provide explanation: Authority for Alternate Procurement Request: Competition can be limited under the following N.D.C.C. provisions or other requirements. Check the appropriate authority reference and attache appropriate documentation. The commodity or service is available from only one source. [N.D.C.C. 54-44.4-05 (2)(a)] No acceptable bid or proposal was received pursuant to competitive bidding or competitive proposal process. [N.D.C.C. 54-44.4-05 (2)(c)] Commodities are being purchased for over-the-counter resale. [N.D.C.C. 54-44.4-05 (2)(d)] A used commodity is advantageous and the commodity is available on short notice. [N.D.C.C. 54-44.4-05 (2)(g)] The commodity is a component or replacement part for which there is not a commercially available substitute and which can be obtained only from the manufacturer. [N.D.C.C. 54-44.4-05 (2)(h)] The services or the circumstances are of such a nature that deviation from the procurement process is appropriate [N.D.C.C. 54-44.4-05 (2)(j)] The commodity or service is available from another government entity's contract. [N.D.C.C. 54-44.4-13]. Attach copy of contract. The commodity or service is required to comply with a grant requirement. Attach grant documentation of requirement.

<u>Justification:</u> Describe all the property performance functions unique to the vendor, the commodity or service, and why a fully competitive procurement process does not meet your needs/specifications, or is not in the best interest of the University System. Factual evidence must be included or attached, such as written documents,				
reports, supporting data, affidavits, patent, copyright or other information.				
Efforts to Identify Other Vendors: Identify other vendors, commodities or services that have been investigated to meet this need, and why they were deemed deficient to meet the need.				
Reasonablene	ess of Cost: Since competition was not used, how did the institution conclude that the co	ost is fair and re	asonable; for example,	comparison to similar
	ervices, market survey, some other method?			
<u>Disapproval Consequences:</u> What are the consequences, including dollar estimate of the financial impact, if this request is not approved?				
Signature		_	Date	
Signature			Date	
Additional Con	mments:			
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For Purchasing	<u>g use uniy</u>			Route this form to:
Approved				Finance Department Phone (701) 774-4250
Rejected	Riley Yadon, CFO Date			