

Oak Ridge Schools - SOLE SOURCE/PROPRIETARY VENDOR JUSTIFICATION FORM



Sole source purchases are goods and services available from only one supplier. Purchases for items that cannot be procured through the competitive bidding process because of the existence of a single source of supply, or because of a proprietary product must be documented as to why the item(s) is considered sole source. Failure to justify a sole source purchase through documentation is a violation of the 1957 Purchasing Act.

Description of items, its function and cost estimate (use back of form if needed) \$ _____

Sole Source Request: Service Contract Good or commodity

This is a sole source vendor because:

- Sole provider of a licensed or patented good or service; or
- Sole provider of items that are repair parts of or upgrades to existing equipment, systems; or
- Sole provider of factory-authorized warranty service; or
- Proprietary Vendor due to Compatibility of existing equipment or products is at issue; or
- Proprietary Vendor because Continuity of results is absolutely dependent upon the proprietary good or service at issue; or
- Proprietary Vendor because District staff or student have extensive training or experience with use of similar goods or services and changes would require significant reorientation and training; or
- Sole provider of unique equipment or products not offered by others. **(*Must complete section below)**

***What steps were taken to verify that these features are not available elsewhere?**

Other brands/manufacturers were examined (List specific company names, phone numbers and contact names, and explain why they were not suitable)

Other vendors were contacted (List specific company names, phone numbers and contact names, and explain why these were not suitable.)

What specific feature makes this item unique and why is this feature needed for your project? (Use back of form if needed)

*****The suggested vendor must provide a letter on their company letterhead stating the reasons that the item(s) is sole source. Attach to this form.*****

Suggested Vendor: _____

Department _____

Contact: _____

My department's recommendation for sole source is based upon an objective review of the goods/service being required and appears to be in the best interest of the School District.

Department Head's Signature _____ Date _____

Purchasing Specialist's Approval _____ Date _____

Executive Director's Approval _____ Date _____

Finance Director's Approval _____ Date _____