

ATTACHMENT A AG-601

SOLE-SOURCE/ PROPRIETARY JUSTIFICATION FOR COMMODITIES

This questionnaire has been designed to assist faculty and staff in providing information necessary in the processing of a request for a sole-source or proprietary procurement. Please complete and forward to the Unit Purchaser. If more space is needed, please attach additional page(s).

PO or Certified Purchasing Request No.: _____

1. Identify the features or characteristics which are unique to the requested product(s):

2. Briefly explain the need for the unique features or characteristics. (This explanation must address the critical importance of the unique or characteristics as it applies to its intended use and/or purpose in your operation.):

3. Identify all other sources whose product(s) have been reviewed and why they are not satisfactory (Attach any quotes/proposals received from other sources, if applicable):

4. Give Brand and Model number of existing equipment if product will be used with existing equipment:

I certify that the above statements are true and correct, and that no other material fact or consideration offered or given has influenced this recommendation for a sole-source or proprietary procurement.

Submitted By: _____
Printed/typed name & title Department

Authorized Signature Date Phone No.

Approved By: _____ Date: _____

Dept Head Director of Purchasing
Form to be submitted with your requests. Both signatures are required for purchases \$5000 and up.