

## PURCHASING DEPARTMENT COMPETITIVE EXCEPTION

The Competitive Exception Form is necessary whenever a request is made to waive the requirement of competition. Currently those requirements are set at any one time purchase in excess of \$25,000.00 or any purchases that exceed \$25,000.00 aggregately during a twelve month period.

The Competitive Exception justification must include the unique features of the product/service requested:

If the product/service is specifically named in your grant, provide a copy of the section of the grant naming the requested vendor.

Describe the items or services requested and list in detail the reasons for requesting the Competitive Exception designation. Include substantiating data such as: companies contacted and the reason for elimination, technical data, etc. Since this is a request to depart from the procedure for competition, a request without support cannot be considered. The buyer may require additional information, and the Purchasing Department remains the final authority in the determination of a Competitive Exception acquisition.

If the product/service must be compatible with other equipment manufactured or services performed by the same vendor, provide the previous purchase order number used to procure the product/service.

If this product/service is available from other vendors you must describe what is unique about the product/service offered by the requested vendor as compared to the other vendors. Provide a list of all of the other vendors of similar equipment/service that you have evaluated and indicate the features that do not measure up to the requested product/service.

To insure the timely processing of your request, the information provided must be thorough.

Complete the Competitive Exception Form and submit it with a requisition to purchasing for review and approval.

# COMPETITIVE EXCEPTION FORM

Date:

Competitive Exception Justification for Purchase Requisition No:

Dept:

I/We have thoroughly researched and determined that the vendor/brand requested in this documentation is the only acceptable vendor/brand for the product/services that will fit my/our particular requirement.

Check all boxes that apply

<input type="checkbox"/> *Used Equipment	<input type="checkbox"/> Professional Expertise	<input type="checkbox"/> Proprietary Item(s)
<input type="checkbox"/> * Auction, Closeout, Bankruptcy, or Similar	<input type="checkbox"/> Donor Specific	<input type="checkbox"/> Standardization
<input type="checkbox"/> * Emergency	<input type="checkbox"/> Supplier Qualifications	<input type="checkbox"/> Qualified Products List
<input type="checkbox"/> Prototype (test purposes)	<input type="checkbox"/> Grant Specific	<input type="checkbox"/> Follow-up Work
<input type="checkbox"/> Only Approved Source	<input type="checkbox"/> Compatibility	<input type="checkbox"/> Other (explain below)

\* Requires approval from the Vice President of Finance and Business per NSHE Chapter 5 Fiscal Procedures

The product/service is required to:

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Description of features or capabilities unique to the vendor/brand being requested as related to project requirements:

List all sources investigated to determine that no other source exists for similar products/services capable of meeting requirements, for example, Internet sites, professional publications, etc. (Must be exhaustive of all sources for the products/services being purchased. If all sources are not investigated, send complete specifications with the requisition and Purchasing will issue a competitive solicitation.)

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Provide a side-by-side comparison of the features/service of all other vendors/brands considered.

I certify under the penalties of perjury that the above statements are true and precise and that I have no financial or other beneficial interest in the Vendor.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_ (requisitioner)

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_