ONSLOW COUNTY SCHOOLS

P. O. Box 99, Jacksonville, NC 28541-0099 Phone: (910) 455-2211 Fax: (910) 455-1548

SOLE SOURCE JUSTIFICATION FORM

Must be completed for all non-competitive purchases* costing \$5,000.00 or more

DATE: _____

VENDOR:

	SCHOOL/DEPARTMENT:
	REQUESTER:
	P. O. NUMBER:
Describe the item(s) and its funct	ion:
SECTION I : Check the appropria	te box below and provide documentation (or complete Section II, as required)
Proprietary:	Item under patent, license, copyright, or proprietary design. (attach documentation)
Replacement Parts:	The procurement is for replacement parts or components in support of equipment designed by the manufacturer; items that are compatible with existing equipment, inventory, systems, programs or services and not available from <u>any</u> other source.
Warranty Services:	Sole provider of factory-authorized warranty service. Use of alternate service provider will void existing warranty. (attach documentation)
Used Equipment:	The vendor is a holder of a used item that would represent good value and is advantageous to Onslow County Schools (attach information showing market price survey, availability, etc.)
Emergency Requirement:	Requirements must be met at once. An explanation of urgency, including a description of why procurement is critical and why only the proposed vendor can meet it. A lack of advance planning is not acceptable (Complete Section II.)
Exclusive Capability:	Only one supplier qualified. No other potential suppliers known. (Complete Section II.)

This section must be completed if either explanation of Emoustification for sole source procurement. Explain why the icompletely explained and documented. It is important to be	dentified vendor is recomm	nended. The justification must b
SECTION III : What steps were taken to verify that the item(s) are not available elsewh	iere?
Other brands/manufacturers were examined (attach doo	cumentation and explain w	hy these were not suitable)
Other vendors were contacted (attach contact informat	ion and explain why these	were not suitable)
Other (please explain)		
AUTHORIZATION AND APPROVALS:		
Department's recommendation for sole source is bar required and appears to be in the best interest of Onslow on my part or personal involvement in any way with the have taken place. Nor has my personal familiarity with been a deciding influence on my request for this sole so other supplier(s) exist.	w County Schools. I am no nis request. No gratuities, n particular brands, types	t aware of any conflict of intere favors, or compromising action of equipment, materials or firn
Signature of Requestor	Date	
Signature of Principal/Department Head or Designee	Date	
	 Date	

* "purchases" refers to an individual item or a group of items having an aggregate value of \$5,000 or more.