

**SOLE SOURCE JUSTIFICATION**

This form must accompany any requisition over \$10,000 whenever a sole source purchase is requested. State law subjects the Peralta Community College District to competitive bidding requirements. Requisitions for goods and services that are to be purchased from a specific vendor or limited to a specific brand, where substitutes to the suggested vendor or brand are unacceptable, must be accompanied by a written justification explaining the circumstances that make alternatives unacceptable. The justification must be signed by the requestor and attached to the requisition.

The Director of Purchasing will determine whether the justification is appropriate. Sole source justifications are to be supported by factual statements that will pass an internal or federal audit.

1. Please circle all applicable categories (**a through d**) below and provide additional information where indicated.
  - a. The requested product is an integral repair part or compatible only with *existing* equipment.  
  
Existing Equipment:  
Manufacture/Model Number:  
Age:  
Current Value:
  - b. The requested product has unique design/performance specifications or quality requirement, which are essential to my instructional needs and are not available in comparable products
  - c. The requested product is one with which I (or my staff) have specialized training and/or extensive expertise. Retraining would incur substantial cost in time and/or money.
  - d. Other factors (provide detailed explanation in #2 below)
2. Provide a detailed explanation for categories checked in 1a through 1d above. **Attach additional sheets if necessary.**
3. Was an evaluation of other equipment, products/ services completed? \_\_\_Yes. \_\_\_No. If yes, please attach the results of evaluation.
4. List below the names of each individual who was involved in the evaluation, if conducted, and in making the recommendation to sole source this purchase.
5. I certify that the above information is true and a signed copy of the Sole Source Justification Form will be kept on file and available for audit in my department. I further certify that myself, or anyone else participating in the decision to recommend this sole source purchase, do not have a business relationship or financial interest in the suggested vendor.

Signature

Printed Name and Title

Date

---