



## BID WAIVER JUSTIFICATION FORM

Complete this form for **any** requisitions or contracts for purchases where competitive bids valued \$30,000 or more will not be obtained by the Purchasing Department. Please complete and email to **Fran Cameron** prior to any commitment (verbal or written). Approved forms must be attached to the requisition or contract.

### PURCHASE DESCRIPTION:

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**VENDOR NAME:** \_\_\_\_\_

**TYPE: (Good, Service or Software):** \_\_\_\_\_

**TOTAL COMMITMENT COST:** \_\_\_\_\_

**Grant Funded:** Y/N

**One Time or On-Going Expense:** \_\_\_\_\_

**If on-going, provide timeline** \_\_\_\_\_

Please indicate the competitive bidding exemption being requested below by checking the box. Provide the requested details. Additional documentation may be attached if needed.

☐ **1. Purchases from other units of government.**

Provide unit of government and description of purchase.

☐ **2. Emergencies – involving the health and safety of the people or their property.**

Provide brief description of emergency.

- ☐ 3. **Group Purchasing Programs** – formally organized programs that offer competitively obtained purchases at discount prices to public agencies.

Please provide the cooperative and the contract number.

- ☐ 4. **Sole – Source** – Provide requested justification below.

*NOTE: Board of Commissioners (BOC) approval REQUIRED.*

- \_\_\_\_\_ vendor is the only authorized distributor / provider for the area\*
- \_\_\_\_\_ item is a special equipment that is manufactured only by this vendor\*
- \_\_\_\_\_ vendor is the only service provider for existing equipment or software\*
- \_\_\_\_\_ vendor is the only authorized proprietary service provider for performing OEM standard services for existing equipment or software\*
- \_\_\_\_\_ standardization or compatibility is the overriding consideration.

*\*NOTE: Provide a letter from the manufacturer indicating as such.*

- ☐ 5. **NC State Contract** – Contracts awarded by NC State Department of Purchase and Contracts and/or NC Department of Information Technology (NCDIT)

Please provide NC State Contract number.

- ☐ 6. **GSA Contract Purchases** – Contracts awarded by a federal agency of the United States.

Please provide Federal contract number.

☐ 7. **Used Goods** – Purchase of used goods from a public or private entity

Please provide a detailed supplier quotation with used goods and pricing.

☐ 8. **Piggybacking** – Provide all details related to original contract.

*NOTE: Board of Commissioners (BOC) approval REQUIRED.*

Please provide: Government Agency that holds the contract, Contract description, date of award.

☐ 9. **Services** – Certain systems and the services required to maintain them are proprietary or uniquely specialized. Only the Purchasing Manager or CFO may waive the RFP requirement for services. All services over \$200K require BOCC approval.

Please provide the details of the proprietary or specialized services being requested.

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.

\_\_\_\_\_  
Requestor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

**Purchasing Department Use Only:**

\_\_\_\_\_  
Purchasing Manager Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approve or Deny

Purchasing Comments: