

BID WAIVER JUSTIFICATION FORM

Complete this form for <u>any</u> 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.

| | Inforcement Uniforms and Equipment | |
|------------|--|--|
| VEND | OR NAME: Galls | |
| TYPE | (Good, Service or Software): Goods | |
| | L COMMITMENT COST: \$500K | |
| | Funded: Y/N | |
| One T | ime or On-Going Expense: Ongoing expense for goods | |
| If on- | going, provide timeline | |
| reques | indicate the competitive bidding exemption being requested below by checking the box. Provide the ed details. Additional documentation may be attached if needed. | |
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| Provide 2. | indicate the competitive bidding exemption being requested below by checking the box. Provide the red details. Additional documentation may be attached if needed. Purchases from other units of government. e unit of government and description of purchase. Emergencies – involving the health and safety of the people or their property. | |
| Provide 2. | indicate the competitive bidding exemption being requested below by checking the box. Provide the red details. Additional documentation may be attached if needed. Purchases from other units of government. e unit of government and description of purchase. | |

| | 3. Group Purchasing Programs – formally organized programs that offer competitively obtained purchases at discount prices to public agencies. |
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| | 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. |
| V | 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. |
| | Sourcewell Contract 011221-GAL - Ballistic Vests and accessories |
| | Sourcewell Contract 011124-GAL - Law Enforcement Uniforms and Equipment |
| | 6. GSA Contract Purchases – Contracts awarded by a federal agency of the United States. |
| | Please provide Federal contract number. |

| 7. Used Goods – Purchase of | of used goods from a public or p | private entity |
|---|--|--|
| Please provide a detailed supplier quotat | ion with used goods and pricing. | |
| NOTE: Board of Commissioners | | |
| Please provide: Government Agency that | t holds the contract, Contract description | 1, date of award. |
| 9. Services – Certain system specialized. Only the Purchasing over \$200K require BOCC appro | Manager or CFO may waive the | o maintain them are proprietary or uniquely he RFP requirement for services. All service |
| Please provide the details of the proprietar | | rd. |
| nituenced inis recommendation | true and correct, and that no othe | r material fact or consideration offered or given l |
| Requestors Signature | Date | Department |
| Purchasing Donoutment Hea Onl | Lu | |
| Purchasing Department Use Onl | 11.4.24 | |
| // | 1 1 . 1 . 2 . 1 | |
| Purchasing Manager Signature | Date | Approve - BOCC Approval Requi |
| | Date | Approve - BOCC Approval Require Approve or Deny |