



ALABAMA COMMUNITY COLLEGE SYSTEM

Request for Sole Source Justification:

Both the vendor and the product(s) must be deemed unique

Requestor: _____ Date: _____
Institution: _____ Phone Number: _____
Campus Address: _____ Fax Number: _____
Preferred Vendor: _____ Amount: _____

I am aware that Act 2021-296 authorized the State to authorize the Chief Procurement Officer or Board of Trustees to promulgate a procurement policy. Therefore, until superseded by ACCS Board Policy, the Alabama Community College System will for its purposes follow the purchasing procedures of the Chief Procurement Officer, including the procurement of all material, equipment, services, and supplies totaling \$25,000.00 or more via competitive bid. Decisions on whether a sole/single source purchase is justified under the above referenced procedure will be made by the chief financial officer of the office or institution contemplating the sole/single source purchase. I am requesting sole/single source approval based on the following criteria. (Attach additional sheets as necessary)

I. The requested product is an integral repair part or accessory compatible with existing equipment.

A. Existing equipment: _____
Manufacturer: _____
Model/Serial Number: _____
Age/Current Value: _____
Estimated Remaining Life Span: _____

B. Requested equipment/accessory/part: _____
Manufacturer/Model Number: _____
Dollar Value: _____

Explain relationship between current equipment and requested equipment

II. The requested product has unique design/performance specifications which are essential to the institutions needs and are not available in comparable products.

A. These capabilities are:

B. In addition to the product requested, I have contacted other suppliers identified below and considered their product of similar capabilities. These products are not acceptable because they are lacking one or more of the technical specifications described in A above.

Explain in detail:

1. Vendor: _____
Vendor contact/phone #: _____
Product Description: _____
Technical Deficiencies: _____

2. Vendor: _____
Vendor contact/phone #: _____
Product Description: _____
Technical Deficiencies: _____

3. Vendor: _____
Vendor contact/phone #: _____
Product Description: _____
Technical Deficiencies: _____

III. Other factors not addressed above which may assist in the sole source justification review process are:

NO SOLE SOURCE WILL BE APPROVED WITHOUT THE BELOW SIGNATURES

I certify that the above information is true and correct and that I have no financial or other beneficial interest in the vendor.

_____ Date: _____
Full Name of Principal Investigator Signature
(Print or Type)

_____ Date: _____
Division Director Signature
(Print or Type)

_____ Date: _____
Chief Financial Officer Signature
(Print or Type)

- Sole/Single Source justification is adequate and purchase is authorized without competitive solicitation.
- Sole/Single Source justification is inadequate and purchase **is not** authorized without competitive solicitation.

_____ Date: _____
President Signature