Sole Source Justification Form
(For Noncompetitive Purchases ≥ $15,000)

Internal Use Only

Instructions: complete and return to Procurement Services at the appropriate Institution's email:

LSCPA: purchasing@lamarpa.edu
LSCO: purchasing@lsco.edu
LIT: purchasing@lit.edu

Procurement Services may request additional information.

The competitive bidding process is the foundation of government purchasing. In rare situations, due to the unique nature of some goods and services, competition may not be possible. It is the responsibility of Procurement Services to verify that competition is not required and that the purchase will result in "best value" for Lamar State College Port Arthur, Lamar State College Orange, and Lamar Institute of Technology in compliance with Texas Education Code §51.9335(b). To make this determination, Procurement Services must understand the unique characteristic(s) of the good or service.

This form is designed to assist LSCPA LSCO LIT staff in communicating the required information to Procurement Services. Please answer the questions below as completely as possible. Additional pages may be attached as needed. Any supporting documentation (quotes, research documentation, etc.) should be attached. Please note that personal preference and/or price are not acceptable as a determining factor.

GENERAL INFORMATION

Department Name:	
Department Phone and Email:	
Vendor Name:	
Vendor Contact Name:	
Vendor Contact Phone and Email:	

1. Provide high-level description of the goods or services to be procured. Include vendor type (service provider/manufacturer/distributor), brand and model number for existing equipment:

2. Required Features – Provide the unique features of the goods or services and indicate why they are required. Describe how the selected vendor can provide these required features:

3. Other Sources – Describe why competing goods or services from other vendors are unsatisfactory and describe any substantial risk to LSCPA LSCO LIT if the required goods or services were not procured from the selected vendor:

CONFLICT OF INTEREST AND CONFLICT OF COMMITMENT STATEMENT

By signing below, I hereby certify that the following statements are true and correct and that I understand and agree to be bound by the commitments contained herein. I am acting on my own accord and am not acting under duress. I am not currently employed by, nor do I have an immediate family member employed by, nor am I receiving any compensation from, nor have I been the recipient of any present or future economic opportunity, employment, gift, loan, gratuity, special discount, trip, favor, or service in connection with this vendor in return for favorable consideration of this request. I also certify that I am not participating in activities outside of my employment which interfere with my official duties and responsibilities.

Requestor/Primary User:

Signature: _____ *Date:* _____

Department Chair/Director:

Signature: _____ *Date:* _____

Vice-President/President:

Signature: _____ *Date:* _____

(Note: Government Code Chapter 572, Subchapter C, Sec. 572.069 – CERTAIN EMPLOYMENT FOR FORMER STATE OFFICER OR EMPLOYEE RESTRICTED. A former state officer or employee of a state agency who during the period of state service or employment participated on behalf of a state agency in a procurement or contract negotiation involving a person may not accept employment from that person before the second anniversary of the date the contract is signed or the procurement is terminated or withdrawn.)

PROCUREMENT APPROVAL – TO BE COMPLETED BY PROCUREMENT SERVICES

Determination: ☐ Approved ☐ Not Approved

Justification:

☐ Proprietary (i.e. Proprietary, original equipment manufacturer (OEM), Unique Specification)

☐ Best Value (i.e. Compatibility, Continuity, Best Value)

Procurement additional comments:

_____

_____

Signature: _____ *Date:* _____

Procurement Services