



# Single/ Sole/ Proprietary Source/Emergency



## Justification Form

**Instructions:** Complete **Sections I – III** of this form for all Single, Sole, or Proprietary source purchases or Emergency purchases for amounts over **\$2,500.00**. Attach this form to your completed Purchase Requisition with a quote(s).

Commodity/Service to be Purchased: \_\_\_\_\_

Proposed Supplier: \_\_\_\_\_

Requested by: \_\_\_\_\_ Department: \_\_\_\_\_

I. A Single, Sole, or Proprietary Source Purchase **must** meet one of the following criteria (per RI General Laws § 45-55-8):

**Single Source** The commodity/service has two or more vendors available; the vendor selected has expertise or previous experience with similar contracts.

**Sole Source** The commodity/service is available from only one vendor.

**Proprietary Source** The commodity/service must be restricted to one manufacturer due to compatibility with existing equipment/products or service. If dealers are available, quotes must be obtained.

**Emergency** **Urgent need** for the item/service does not permit soliciting competitive bids, as cases of emergencies, disasters, etc. Purchases should be made with such competition as is practicable under the circumstances.

II. Provide details for this request including an explanation of why only one source is reasonably available. For Proprietary Source purchases; is this part of an integral system?  
(attach a separate sheet if necessary)

III. Why is the offered price considered reasonable? What efforts have been made to negotiate the best price for this non-competitive purchase?

Approval: \_\_\_\_\_

Administrator

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Purchasing Agent

Date: \_\_\_\_\_