

Department of Procurement Services

Sole Source Request Form

Date:		Vendor:			
Department:		C	ontact:	Phone #:	
This fo	orm must	be completed by the requesting col	llege or department, and mu	ust accompany all requests for sole source purchases.	
				cably available for the product(s) or service(s) required. artment is requesting a sole source purchase:	
A.	Depai	tmental Responsibilities:			
	1.			duct(s) or service(s) be required on a recurring annual	
	2.	Is the requested product(s) or se Software as a Service ("SaaS")	rvice(s) for an application so Yes	oftware (desktop or local server based) and/or hosted No	
		If yes, has Information Technolog review?	= -	intake' data and systems security and risk assessment	
	3.	Describe the product(s) or service	e(s) being requested as "sole	e source", and how same will be used	
	4.	, , , , ,	' ' '	duct(s) or service(s), and how same will provide	
	5.	product(s) or service(s), and why point of contact information, (ii)	those vendors were not set time frame and evaluation	rs that were also considered to provide the requested lected. For each vendor identified, please provide (i) methodology used for comparison to requested sole	

1. Negotiate cost and/or contract scope, deliverables, or associated terms and conditions. 2. Determine price reasonableness. 3. Issue executed contract and/or approve purchase order. Requirements 1 through 9 must be completed accordingly prior to forwarding to Procurement Service expressed delegated authority provided under University Policy #1500, it is the responsibility of Procurement, and execute on behalf and in the best interest of Old Dominion University, all procurement, when appropriate and as necessary, Procurement Services may include the college or deposite and negotiation processes. Recommendation: Approved / Disapproved:	Ftta	Henry,		Date	** Chad A. Reed	Date		
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	Арр	roved / Di	isapproved:					
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	Dep	artment F	Head (Print Name)					
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	Department Head (Signature) Date		Harry Smithson, Jr., Assistant Director, Procurement Services	Date				
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	Reco	ommenda	tion:		Approved / Disapproved:			
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	xpro ippr low	essed dele ove, nego ever, whe	egated authority provided under Univers otiate, and execute on behalf and in the b en appropriate and as necessary, Procure	ity Policy i best intere	#1500, it is the responsibility of Procurement Services is stof Old Dominion University, all procurement related	to review, I contracts		
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$								
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$			conditions.					
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$	•							
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$			Forward to Procurement Services for contract review, negotiations and contract award.					
Additionally, please indicate the total cost for the requested product(s) or service(s), request, please indicate total cost over the entire term of the agreement. \$								
Additionally, please indicate the total cost for the requested product(s) or service(s),		9.						
		8.	Additionally, please indicate the total	cost for th	e requested product(s) or service(s), i.e., if a multi-year contrac			
7. Explain why this vendor is the only 'practicably' available source from which to obtai service(s).		,,	Explain why this vendor is the only 'practicably' available source from which to obtain the requested product(s) service(s).					

Explain why the requested product(s) or service(s) is/are the only product(s) or service(s) that can and will meet

6.