

## **SOLE SOURCE / PROPRIETARY PURCHASE**

Requisition #:		Agency: University of Louisiana at Monroe			
Indicate if Sole Source or Proprie	etary: Sole Source	Proprietary			
Product or Service Description:					
Vendor Name:					
Street:		City:	State:	Zip:	
Phone: F	ax:	Email Address:			

**Sole Source** and **Proprietary** purchases are allowed by the Louisiana Procurement Code (LA R.S. 39:1551, et seq.) when certain conditions exist. This form may be used to justify Sole Source or Proprietary purchases for unique products, services, or conditions you may have. A letter from the vendor, on vendor letterhead, and signed by an officer of the company, must be attached to this form and will be part of the permanent record for this purchase.

A <u>Sole Source</u> justification represents a request from the end user for State Purchasing to waive the bid process in accordance with LA R.S. 39:1597 and L.A.C. 34:I.901-907. For the purpose of this form, <u>the particular item or service is available from only one supplier (usually the manufacturer)</u> and is unique in that no other will be suitable or acceptable to meet the need.

A <u>Proprietary</u> specification justification represents a request from the end user to limit the specification to describe a product proprietary to one supplier in accordance with LA R.S. 39:1655, and meets the definition in L.A.C. 34:I.309. A Proprietary purchase is similar to Sole Source when <u>no other product is suitable or acceptable to meet the need, but there is more than one potential bidder because the manufacturer has chosen to sell his product through multiple distributors. A Proprietary purchase is considered competitive and the solicitation shall include language indicating the purchase has been approved as proprietary and not invite bids of equal products.</u>

1. Explain specification requirements and how or why ONLY the designated product/service meets the need. Cite the qualities/features that make this product or service unique in meeting the need. *Use page three for additional space if necessary*.

2.	Specifically name, by manufacturer and model or service two, explain why. Use page three for additional space if	e provider, other products or services investigate. If fewer than inecessary.
3.	-	gated are deficient in meeting the need. Or if the purchase is de equipment name, where it is located, and model number or cessary.
4.	representative) stating product or service is not sold the retail price verification for the item(s), and submit all depurchasing.	declaration of Sole Source from corporate marketing (no sales rough distributors, attach a notarized or published price list or locuments to Purchasing for approval and forwarding to State  — OR —  ng for approval and forwarding to State Purchasing.
	Signature & Title of Requestor	Date
	Additional Approval Signature & Title (if required)	 Date
	Purchasing Agent Signature	Date
	Director of Purchasing Signature	Date

Additional Information (if needed):