

# SEWANEE

THE UNIVERSITY OF THE SOUTH

## Request for Waiver of Competitive Bidding

The University procures goods & services competitively whenever practicable. Competitive bidding is required for purchases over \$5,000. Individuals and departments can request to waive competitive bidding by use of this Request form if the purchase meets one of the conditions for waiver. The Vice President of Finance and Treasurer, Director of Business Services and Purchasing Manager may waive competition and approve waiver requests when justified.

This form must accompany a requisition when seeking to purchase goods or services in excess of the bid limit of \$5,000 per supplier (contract suppliers are exempted). The below is a list of rationale for requesting waiver of competitive bidding. Check the applicable category and provide written justification for your request. Justifications for the emergency waiver should include any reasonable efforts made under the circumstances to select goods or services at the best value for the University. Remember to sign and date the form.

**SOLE SOURCE:** No other company provides the required goods or services that meet the University's requirements. Sole source requests must include a statement from the supplier indicating their quoted price is equal to the pricing given to supplier's most favored customer or governmental agencies.

**EMERGENCY:** The goods or services are to correct or prevent an emergency health, environmental or safety hazard; special or time sensitive events; and/or emergency repair or replacement of existing equipment essential for daily operations.

**ECONOMIC:** Use of another supplier would result in incompatibility with existing conditions; require considerable training, time and money to evaluate; the goods or services are being used in ongoing long-term projects; and/or the product/service offered is at a substantial discount below current market conditions and price structures (provide documentation detailing the cost benefits to the University).

*Please type or print justification; attach additional sheets as necessary.*

**SERVICE(S) OR GOODS REQUESTED BY:**

Dept. Name: \_\_\_\_\_ Requisitioner: \_\_\_\_\_

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

Cost: \_\_\_\_\_ Vendor: \_\_\_\_\_

Recommend for approval: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Department

Justify your selection by providing the information described above. Attach additional documentation if helpful or required.

\_\_\_\_\_  
\_\_\_\_\_

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I certify that the above information is complete and accurate to the best of my knowledge.

**Purchasing and Internal Use Only:**

Bid waiver approved

Bid waiver disapproved

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

\_\_\_\_\_  
Vice President for Finance and Treasurer or Director of Business Services

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

\_\_\_\_\_  
Purchasing Manager

Revised 02/01/2021