



Waiver of Competitive Purchase

Requires Department Director or General Manager's Signature

Date:	Requisitioned By:	Extension:
	Department:	Division:

Exemptions to competitive bidding are only approved as authorized in the Las Virgenes Municipal Water District Code and require approval of the Department Director or General Manager **prior** to purchase.

An exemption to competitive bid is appropriate for the following reason (check appropriate boxes):

<input type="checkbox"/>	Sole Source:	Competition does not exist. Product is only available through one vendor
	Unique Expertise:	Firm or consultant offers a specific expertise in the field
<input type="checkbox"/>	Proprietary:	Item must be Original Equipment Manufacturer (OEM) and /or purchased or serviced by exclusive distributor because: <ul style="list-style-type: none"> <input type="checkbox"/> Use of non-OEM equipment voids warranty <input type="checkbox"/> Non-OEM replacement does not exist <input type="checkbox"/> Non-OEM replacement is documented to not perform
<input type="checkbox"/>	Evaluation:	Purchase is for a trial evaluation/test
<input type="checkbox"/>	Repeat Purchase:	Purchase was bid during the last year and the purchase utilizes the same terms and conditions Original Purchase Order or Contract: _____ Date of Original Purchase or Contract: _____
<input type="checkbox"/>	Cooperative or Piggyback :	Purchase will "Piggyback" from existing competitively bid governmental agency contract or cooperative purchasing agreement which allows the District to utilize the same price, terms, and conditions
<input type="checkbox"/>	Other:	

Provide business justification supporting the non-competitive purchase in the space below including why the good or service is the only one that can meet the District's needs, what is unique about the good or service, what alternatives were evaluated, what action(s) the department would take if the sole source good or service were no longer available and/or any additional information that justifies the non-competitive purchase. Attach additional sheet, if necessary:

<input type="checkbox"/> Budgeted Item	Amount: \$	Vendor:	Phone/E-mail:
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Approved* Denied _____ Date: _____
 *Approval valid for this purchase and terms only Department Director or General Manager