**JUSTIFICATION FOR SOLE SOURCE CONTRACT**

**To: Date:**

**From: Requiring Activity:**

**1. The service or item listed on the attached Purchase Request is only available from a single source and competition is precluded for reasons indicated below. There are no substitutes available for this item/service. The requirement is restricted to the following sole source manufacturer and/or manufacturer’s dealer or representative:**

**Manufacturer Information*:* Dealer/Rep Information:**

**Name: Name:**

**Address: Address:**

**City, State, Zip: City, State, Zip:**

**POC: POC:**

**Phone #: Phone #:**

**E‐mail** :

**E‐mail:**

**Note*: Include additional pages to this form as necessary to provide a complete description and details for the following blocks***

1. **Estimated cost of the requirement: 2a. Required Delivery Date:**
2. **Description of the item or service required:**
3. **Specific characteristics of the item or service that limit the availability to a sole source (e.g. unique features, function of the item, etc.):**
4. **Describe in detail why only this suggested source can furnish the requirement to the exclusion of other sources (e.g., summarize the results of any supporting market research, as appropriate):**

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1. **Is the item/service compatible in all aspects (form, fit and function) with existing systems presently installed?**

**If yes, describe the equipment you have now and how the new item/service must coordinate, connect, or interface with the existing equipment.**

1. **Does a patent, copyright, or proprietary data limit competition?**

**If yes, list the proprietary data:**

1. **If the items are “direct replacements” parts/components for existing equipment identify and briefly describe the existing equipment:**

**REQUESTOR**

**I CERTIFY THAT THE STATEMENTS AND INFORMATION PROVIDED ABOVE ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THE PROCESSING OF THIS SOLE SOURCE JUSTIFICATION PRECLUDES THE USE OF FULL AND OPEN COMPETITION.**

**Signature: Activity:**

**Title: Date:**

**APPROVAL**

**Contracting Officer’s Signature: Date:**

**Contracting Office’s Printed Name:**

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