

SOLE SOURCE JUSTIFICATION FORM

Overview: This form provides a standard way to document single or sole source justifications for purchases that are above the U-M Procurement formal bid threshold (\$50,000), but where a competitive bid is not possible, or the requestor/business unit is requesting that no competitive bid be executed. The completed form must be attached to the purchase request along with any supporting materials and initial supplier research done by the department. **Do NOT use the Adobe Fill & Sign functionality to complete this form** – type in the provided boxes.

Justification Type

This purchase is being requested as either a single source or sole source justification. For information, please review Section XII of the [SPG 507.01](#).

Single source purchase requests will be considered in instances where alternate products and sources exist, but only one truly meets the needs of the requesting department and all others are found to be inferior. Single means one among others.

Sole source purchases will be considered when no alternative exists for the item(s) or service(s) required and the identified source can be documented as the only source available. The determination is based on the unique qualifications or specifications of the purchase such that no other acceptable alternative product or source exists. The determination is not price based.

Justification Type (check any/all that apply):

Proprietary materials and services; maintenance or service from OEM or authorized dealer

No substitutions available to match existing hardware/equipment/services

Supplier is specified by name in an awarded contract or grant

Is being procured due to an emergency

Other

[Please refer to this knowledge article for additional guidance on how to respond to this section](#)

Requested Good(s) and/or Service(s)

Description

Estimated Value: \$ _____ Requisition # (if available): _____

Supplier Name: _____ U-M Supplier ID: _____
(if known)

Supplier Justification

Provide a detailed and technical explanation of proposed supplier’s unique ability to offer the requested good(s) and/or service(s). Identify any other supplier that offers similar good(s) and/or service(s). Specify why the proposed supplier is the only company that can meet the university’s requirement and/or need. [Please refer to this knowledge article for additional guidance on how to respond to this section.](#)

Cost Justification

Provide evidence that due diligence has been performed to ensure that the university has received fair and reasonable pricing. Use supporting documentation as proof that an objective market analysis was conducted. [Please refer to this knowledge article for additional details and acceptable forms of supporting documentation.](#)

REQUESTOR ACKNOWLEDGEMENT

I acknowledge the university’s requirements for soliciting competitive bids for purchases over \$10,000 and the criteria for justification for single/sole source purchases. I have made a concerted effort to review comparable/equal offerings (e.g., market research), and affirm that there is no conflict of interest involved in the selection made. The end user requesting the good(s) and/or service(s) has sufficient technical expertise on the specifications and requirements (e.g., PI). Completion of this form does not guarantee the approval of the procurement request. Procurement Services reserves the right to competitively bid, negotiate pricing, or solicit additional information and remains the final authority on all procurement issues.

Requestor Name _____ **Title** _____

Signature _____ **Date** _____

Department/Organization: _____

DEAN, DIRECTOR, DEPARTMENT HEAD, OR ASSOCIATE HOSPITAL DIRECTOR APPROVAL (required)

Approver Name _____ **Title** _____

Signature _____ **Date** _____