

**Sole Source Justification/Approval Form**

REQ # \_\_\_\_\_

PO # \_\_\_\_\_

Complete this form when only one source is available for goods or services requested or when only one product will meet your needs. Respond to all questions that apply. Please complete and forward to the Purchasing Department, along with Sole Source letter provided by vendor. If more space is needed, please attach additional page(s).

**PURCHASE INFORMATION**

1. Provide Estimated Price.

\$53,684.23

2. Provide name, manufacturer, and model number of item being purchased or the services to be purchased.

Motorola Astro System Essential Plus Package

3. Provide Description of requested items or services and their purpose(s). Add additional sheet if needed.

Essential Plus Package, Astro Network Security Monitoring, Astro Network Monitoring, Contract Administration Service, Astro SUA II UO Implementation Services, Release Impact Training, Release Implementation Training, Astro SUA II Field Implementation Service, System Upgrade Agreement II

4. Reason(s) for requesting a sole source purchase:

- Original manufacturer or provider.
- Only local distributor for the original manufacturer or provider.
- Only known item or service matching the requested needs or performing the intended task.
- Sole provider of a licensed or patented good or service.
- Sole provider of items compatible with existing equipment, inventory, systems, programs or services.
- Sole provider or factory-authorized warranty service.
- None of the above applies (Please attach a detailed explanation and justification for this sole source request.)

5. Explain why the product or service requested is the only one that can satisfy your requirements.

Motorola is the only provider of connectivity services that are managed, monitored, and public safety rated, all of which are requirements to ensure uninterrupted connection between Ft. Worth core site, the Irving back-up core site, and the NRH remote site.

6. Identify other sources reviewed and why they are unacceptable. Be specific with regard to specifications.

Attach additional pages if necessary.

There are no other available vendors that can supply a backhaul connection which is public safety rated and continuously managed and monitored to ensure uninterrupted connectivity.

I certify that the above statements are true and correct, and that no other material fact or consideration offered or given has influenced this recommendation for a sole-source or proprietary purchase.

Leah Michaels

Print/Type Name

*Mike Young*

Department Director's Signature

Administrative Technican

Print/Type Title

08/27/2024

Date

Technical Services Division

Department

(817)427-7072

Telephone Number

**PURCHASING USE ONLY**

Approved by: *Eva Ramirez*

Purchasing Manager (or designee)

Date: 08/27/2024

## City of North Richland Hills Sole Source Justification/Approval Form

### INSTRUCTIONS FOR JUSTIFICATION FORM

1. Form to be used along with Departmental Purchase Requisition. It is used for the purchase of products/services that are only available from one source.
2. Preparation of the form:
  - a. Assign corresponding Departmental Purchase Requisition number.
  - b. Provide Estimated Price.
  - c. Provide name, manufacturer and model number of item being purchased or the services to be purchased.
  - d. Provide description of requested items or services.
  - e. Select reason for Sole Source purchase.
  - f. Indicate an explanation of the need for the sole-source (part/parts of the specifications which restrict the purchase to one product, manufacturer or provider).
  - g. Indicate the reason competing products or services are not satisfactory. Attach supporting documentation for the sole source justification.
  - h. Obtain appropriate authorized signatures.
  - i. Submit the form and supporting documentation to the Purchasing Office.

NOTE: Prior to committing a Purchase Order for the product or service, the justification must be reviewed and approved by the Purchasing Manager or his/her designee.