Department of General Services

Emergency Procurement ("EP") Approval Request

Bureau of Procurement

If either of the following two conditions exist, an EP is not required and should not be requested:

- 1. Material / Service available from DGS statewide contract.
- 2. Estimated Cost of the Material / Service is within the Small, No-bid Procurement threshold identified in the Procurement Handbook, Part I, Chapter 7.

Agency requests approved to proceed with an emergency procurement under Section 516 of the Commonwealth Procurement Code (62 Pa. C.S. §516).

Requesting Agency Information

| Agency/Bureau: | Department of Corrections | | | | | | |
|--|---|---------------|-------|--------------|---------|-------|--|
| Contact Person: | Beth Procopio | | | | | | |
| Contact Address: | 1920 Technology Parkway Mechanicsburg PA 17050 | | | | | | |
| Contact Tel#: | 717-919-1137 | | | | | | |
| Contact Email: | blprocopio@pa.gov | | | | | | |
| Description Of Material (or) Service (or) IT | Material Food for inmates and staff | | | | | | |
| SAP Material Groups: | 80101706 | | | | | | |
| Estimated \$ Amount: | 1000000 | | | | | | |
| Length of EP: | 60 Days | | | | | | |
| Delivery Location: | City | Mechanicsburg | State | Pennsylvania | ZipCode | 17050 | |

Basis for the Emergency Purchase



Threat to public health, welfare, or safety Due to COVID 19 many Correctional facilities are changing their normal feeding Identify the Threat: protocols. Due to this change certain food items are becoming difficult to obtain. Our current vendor is reporting shortage of some products. An adequate food supply is essential for feeding inmates and staff. Provide a brief explanation of the need for the material and/or service: We do not have the time to follow normal procurement procedures to obtain food. State the consequence if the We need to be able to react to shortages immediately. Without this EP we run the procurement is not done on risk of having shortages of certain food products which can be a threat to the health emergency basis: and safety of both inmates and staff.

| | Indicate whether was obtained | from DGS. | If "Yes", provide the following: ☐ Yes a. Name of person granting approval: ☐ No b.Date of approval: | | | | | |
|---|---|-----------------------------|--|--|--|--|--|--|
| | Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods | | | | | | | |
| | NOTE: Verbal approval will not be provided for this basis. Agency cannot proceed with emergency procurement until this form is completed and approved by DGS. | | | | | | | |
| | Identify the Circun | nstances: | | | | | | |
| | Why are those circumstances ou the control of Age | | | | | | | |
| | Provide a brief exp for the urgent nee | | | | | | | |
| Information Required | | | | | | | | |
| For ALL EP's provide the following information: | | | | | | | | |
| Brief description of selection process: | | ction | Vendor is not know at this time and the vendor will vary depending on the product needed. | | | | | |
| | Full ounnilor | Name: | | | | | | |
| Full supplier Information Address: | | Address: | | | | | | |
| • | mission of form) | | | | | | | |
| Sub | | Telephone #: | \dashv | | | | | |
| | | SAP Vendor#: | Total Amount | | | | | |
| For EP's that are NOT a threat to public health, welfare, or safety, provide the following information | | | | | | | | |
| Include a list of the solicited suppliers, their contact information, and their quotations: | | | | | | | | |
| Funds have already been encumbered for this request (Yes/No): | | | ☐ Yes ☑ No | | | | | |
| If applicable, what has been done previously to procure this material/service? (Also provide the previous SAP/SRM PO number and/or Contract Number) | | is provide the number | | | | | | |

NOTE: If any Agency only intends to solicit a quote from one supplier, the following section,
"Supplemental Single Source Information" must be completed

Supplemental Single Source Information Required

This section of the EP APPROVAL REQUEST Form is only required to be completed if the following is applicable:

1. Category of Emergency is due to "Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods."

2. It is not practical for the agency to obtain two or more quotes.

Is only a single supplier capable of providing the material or services? If Yes, please explain. If not applicable, leave blank and respond in the next block.

Explain why it is not practical to obtain two or more quotes for this emergency procurement.

If timing is a factor, what is the time factor and why? If yes, please explain.

Are there compatibility requirements or compliance requirements? If yes, please explain.

NOTE: If the purpose of the emergency procurement is to prevent a lapse in contracted services, one of the following must be checked. Include status of the new contract/purchase and note any special conditions of the emergency procurement.

| To extend a current contract with the current contractor to prevent a lapse in contracted services. |
|--|
| To bridge a gap between an expiring contract and a new contract by allowing the new contractor to begin work before the new contract is fully |
| To authorize a supplier, who has been properly selected through one of the methods of award, to begin work before the new contract is fully executed because the agency needs the services immediately and cannot wait until full execution of the |
| If none of the above is applicable, explain how the emergency supplier was selected. |

Agency Approvals

IMPORTANT*: The printed names on this form shall constitute the signatures of these individuals. Agencies must insure that these individuals review the completed form and give their consent to apply their printed name on this form. No handwritten signatures shall be required in order for the form to be considered "signed" by those individuals whose names appear in the signature section

Requesting Authority (Agency Head or Designee reviewing and approving this request)
Requesting Authority signature connotes concurrence with the Agency EP request to procure the material and/or service

| Title: Chief, Division of Administration | | | |
|--|--|-------|----------|
| Signature: Beth Procopio | | Date: | 04-01-20 |