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 Office of Administration (under Governor's Office)

Agency/Bareau.								
Contact Person:	TEST - De	TEST - Department of Agriculture (Tracee Gotwalt)						
Contact Address:	II .	2301 North Cameron Street Harrisburg PA 17110						
Contact Tel#:	717-705-05	717-705-0575						
Contact Email:	TGotwalt@	TGotwalt@pa.gov						
Description Of		Lab Equipment - Elemental Analyzer						
Material (or) Service (or) IT	Material							
SAP Material Groups:	TEST - LECO							
Estimated \$ Amount:	44,500							
Length of EP:	30 Days							
Delivery Location:	City Harrisburg State Pennsylvania ZipCode 17110							

Basis for the Emergency Purchase



Threat to public health, welfare, or safety					
Identify the Threat:	TEST				
Provide a brief explanation of the need for the material and/or service:	TEST				
State the consequence if the procurement is not done on emergency basis:	TEST				

	Indicate whether	or approval		If "Yes", provide the f	ollowing:				
Indicate whether approval was obtained from DGS.			✓ Yes	a. Name of person gran	nting approval:	TEST			
			No	b.Date of approval:		05-20-15			
	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 outside of the control of Agency?									
	Provide a brief exp								
	Information Required								
For A	For ALL EP's provide the following information:								
Brief proce	description of selects:	ction	TEST	ī					
		Name:	LECO)					
	Full supplier information	Address:	Lab E	Lab Equipment Street					
(if k	known at time of								
•	mission of form)								
		Telephone #:	717-7	717-705-0575					
		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			/es						
encumbered for this request (Yes/No):			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)									

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	'Ap	prova	ls
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IMPORTANT*	:The printed	names on	this form	shall co	nstitute the	signatures	of these	individuals.
Agencies m	ust insure th	nat these i	ndividuals	review the	completed	form and	give their	consent to
apply their	printed name	on this fo	rm. No ha	ndwritten s	signatures s	hall be requ	uired in or	der for the
form to be	considered '	'signed" by	those ind	ividuals wh	hose names	appear in	the signat	ure 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 Financial Officer		
Signature:	Tracee S. Gotwalt	Date:	05-20-15