

SOURCE JUSTIFICATION FORM

Bureau of Procurement

The objective of this form is to capture all relevant documentation an Agency may have to assist the Department of General Services ("DGS"), Bureau of Procurement, in expediting the source justification review process. This form must be completed electronically, signed, and submitted with all relevant documentation to DGS. If a question is neither mandatory nor applicable, please indicate "N/A". Please use standard terminology and define acronyms.

SECTION A

1. Agency Name:	Pennsylvania Emergency Management Agency		
2. Procurement Description: This description will appear on the eMarketplace website for public viewing	Provide satellite and networking services for the PA Emergency Agency and statewide locations.		
Materials Description:			
Services Description:			
3. Materials Shopping Cart # or Services SPR#	6100031833	Estimated Cost:	\$100,001 - \$250K
		Initial Contract Term:	1 year
		Renewals:	1
4. Supplier - Name:	Hughes Network Systems		
Full Address:	11717 Exploration Lane Germantown, MD 20876		
Contact Name:	Amir Dehdashty		
Telephone:	301-601-2674	FAX:	
E-mail:	amir.dehdashty@hughes.com		
SRM Supplier #:	303603		
5. Delivery or service location:	2605 Interstate Drive Harrisburg, PA 17110		

SECTION B

<input type="checkbox"/>	1. Sole Source: Only known source - Not available from another supplier.
<input checked="" type="checkbox"/>	2. Material/Repair/Maintenance: Material or service MUST be compatible with existing equipment. Documentation must be provided from the manufacturer.
<input type="checkbox"/>	3. Used Equipment: Value set by 2 independent 3rd party appraisals.
<input type="checkbox"/>	4. Professional Expert: Describe in detail in Section C.
<input type="checkbox"/>	5. Exempt (Law): A federal or state statute or regulation exempts the procurement from the competitive procedure. Any applicable information precluding the procurement from competitive procedures must be attached.
<input checked="" type="checkbox"/>	6. Feasibility: Clearly not feasible to award the contract on a competitive basis.

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SECTION C

1. Describe the unique features of this procurement that prohibit a competitive environment. If applicable, attach a Statement of Work ("SOW").

The Satellite Warning System is an existing satellite based data/voice network which PEMA currently utilizes to meet several Title 35 requirements. This infrastructure exists at approximately 100 locations throughout the commonwealth and supplies services to both Counties as well as other state agencies. This network utilizes priority infrastructure that will require and entire change out of equipment at each location. This contract expires 3/31/2015 and would be impossible for PEMA or the commonwealth to procure and replace the necessary equipment at each location. For this reason an in order to meet Title 35 requirements, PEMA request an extension of the existing HNS Satellite service contract.

While PEMA's commitment to lower cost while maintaining a robust, reliable and resilient communication infrastructure is an ongoing effort, we desire to combine services wherever possible and prudent.

2. Document and attach the research that has been conducted to date to verify the supplier is the only known source.

N/A

3. Does the supplier utilize distributors, dealers, resellers, etc.? If "Yes," please identify.

Yes for smaller services, a contract this large is handled directly with the service provider.

4. Are there compatibility requirements or compliance requirements with a warranty or service agreement? If "Yes," please explain.

N/A

5. How has the material or service been procured in the past? Please provide previous source justifications, contracts, & PO's for this material or service.

The services have been in place for several years. The current PO is 4300357220, which expires 3/31/15.

6. If procured through the IT ITQ process, please provide original \$ amount and contract period of order. Is this the final phase of the project?

N/A

7. If this is an upgrade, addition, alteration, etc., to an earlier procurement, please describe in detail.

N/A

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8. What are the consequences of not approving this procurement?

PEMA requires robust communications to contact county, city, regional offices and other commonwealth agencies. The SWS provides both voice and data services. Voice services allow PEMA, counties, regional offices and cities to communicate directly regardless of the status of telephone systems. The data side is a computer network without terrestrial lines using satellite-based technology. The SWS also provide the communication path for Integrated Flood Observing and Warning System (IFLOWS). IFLOWS is a cooperative venture between the National Weather Service and seven flood-prone states to reduce the annual loss of life from flashfloods, reduce property damage, and reduce disruption of commerce and human activities. Deactivation of the SWS network would disrupt these services.

9. If timing is a factor, what is the time factor and why?

Yes, current contract expires 3/31/2015

10. List any other information relevant to the acquisition of this procurement here or as an attachment.

Attached HNS Quote

11. For requests > \$100,000, has the supplier signed cost or pricing data certification and is the pricing breakdown attached?

Yes

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SECTION D

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 of the form.

Shopping Cart Contact Person (Person whom DGS will contact regarding the Shopping Cart):

Name:	<input type="text" value="Larry Dove"/>	P-Group:	<input type="text" value="FS1"/>	Date:	<input type="text" value="01-26-15"/>
Title:	<input type="text" value="Purchasing Agent 3"/>	Telephone:	<input type="text"/>	Fax:	<input type="text"/>

Agency Contact Person: Person in your agency that DGS can contact for additional information, etc.

Name:	<input type="text" value="Jennifer Stultz"/>	Title:	<input type="text" value="IT Generalist Administrator"/>	Date:	<input type="text" value="01-26-15"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text" value="jstultz@pa.gov"/>

Approving Authority (Agency Head or Deputy reviewing and approving this request): Approving Authority connotes approval of the source justification and the cost or pricing data certification.

Name:	<input type="text" value="Rita Rellick"/>	Title:	<input type="text" value="Deputy Director for Administration"/>	Date:	<input type="text" value="01-26-15"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Approvals (if required by Agency):

Name:	<input type="text"/>	Title:	<input type="text"/>	Date:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text"/>
Name:	<input type="text"/>	Title:	<input type="text"/>	Date:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text"/>
Name:	<input type="text"/>	Title:	<input type="text"/>	Date:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text"/>
Name:	<input type="text"/>	Title:	<input type="text"/>	Date:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text"/>
Name:	<input type="text"/>	Title:	<input type="text"/>	Date:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>	Email:	<input type="text"/>