**Department of General Services** 

# 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 State Police				
2. Procurement Description: This description will appear on the eMarketplace website for public viewing	The National Law Enforcement Telecommunications System (NLETS) allows all states to communicate with one another and access computerized criminal history and vehicle information.				
Materials Description:					
Services Description:					
3. Materials Shopping Cart # or	6100036751	Estimated Cost:	\$100,001 - \$250K		
Services SPR#		Initial Contract Term:	1/1/16-12/31/16		
		Renewals:	four (4) one year option		
4. Supplier - Name:	National Law Enforcement Telecommunications System (NLETS)				
Full Address:	1918 W. Whispering Wind Dr, Phoenix, Arizona 85085				
Contact Name:	Timothy Cook				
Telephone:	623-308-3554 FAX: 623-308-3501				
E-mail:	tcook@nlets.org				
SRM Supplier #:	140322				
5. Delivery or service location: PSP, 1800 Elmerton Avenue, Harrisburg, PA 17110					
SECTION B					
☑ 1. Sole Source: Only known source -	Not available from another supp	olier.			
<b>2.</b> <i>Material/Repair/Maintenance</i> : Material or service MUST be compatible with existing equipment. Documentation must be provided from the manufacturer.					
3. Used Equipment: Value set by 2 independent 3rd party appraisals.					
4. <i>Professional Expert</i> : Describe in detail in Section C.					
5. Exempt ( <i>Law</i> ): 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.					

**6. Feasibility:** Clearly not feasible to award the contract on a competitive basis.

## **SOURCE JUSTIFICATION FORM**

**Bureau of Procurement** 

### **SECTION C**

- 1. Describe the unique features of this procurement that prohibit a competitive environment. If applicable, attach a Statement of Work ("SOW").
- 2. Document and attach the research that has been conducted to date to verify the supplier is the only known source.
- 3. Does the supplier utilize distributors, dealers, resellers, etc.? If "Yes," please identify.
- 4. Are there compatibility requirements or compliance requirements with a warranty or service agreement? If "Yes." please explain.
- 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.
- 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?
- 7. If this is an upgrade, addition, alteration, etc., to an earlier procurement, please describe in detail.
- 8. What are the consequences of not approving this procurement?
- 9. If timing is a factor, what is the time factor and why?
- 10. List any other information relevant to the acquisition of this procurement here or as an attachment.

NLETS is the only mechanism available for the State of Pennsylvania to communicate with the law enforcement community in the remaining 49 states. It was established by the states to allow for the passing and access to information particularly as it relates to vehicle and criminal information. There is no other means to acquire this information except through the NLETS system.

N/A
No
N/A
This service has been procured sole source in prior years hrough Purchase Orders: 4300254642, 4500364288,

This service has been procured sole source in prior years through Purchase Orders: 4300254642, 4500364288, 4500270468, 4500180705, 4500038552, 4500027597, SP2010010044, SP2010000035, SP336070, SP272285, and SP153659.

N/A

N/A

Without NLETS, PSP would not have access to crucial criminal history records throughout the country needed for investigation and other law enforcement duties. Criminal history is a key factor in the safety of civilians as well as law enforcement officers.

Purchase Order 4300254642 (dated November 14, 2014) established support period of January 1, 2015 to December 31, 2015.

See question 8 above. Without NLETS, PSP would not have access to crucial criminal history records throughout the country needed for investigation and other law enforcement duties. Criminal history is a key factor in the safety of civilians as well as the law enforcement officers.

Department	of	General	Services
------------	----	---------	----------

## **SOURCE JUSTIFICATION FORM**

**Bureau of Procurement** 

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

V/A			

#### **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.

be considered "signed" by those individuals whose names appear in the signature section of the form.					
Shopping Cart (	Contact Person (Person who	om DGS will co	ontact regarding the Shopping	Cart):	
Name:	Erin Webster	P-Group:	BM4	Date:	01-29-16
Title:	Purchasing Agent 1	Telephone:		Fax:	
Agency Contact	Person: Person in your ager	ncy that DGS ca	an contact for additional informa	tion, etc.	
Name:	Erin Webster	Title:	Purchasing Agent 1	Date:	01-29-16
Telephone:		Fax:		Email:	erwebster@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:	Maggie Boyer	Title:	Director	Date:	01-29-16
Telephone:		Fax:			
Additional Appr	rovals (if required by Agen	cy):			
Name:		Title:		Date:	
Telephone:		Fax:		Email:	
Name:		Title:		Date:	
Telephone:		Fax:		Email:	
Name:		Title:		Date:	
Telephone:		Fax:		Email:	
Name:		Title:		Date:	
Telephone:		Fax:		Email:	
Name: Telephone:		Title: Fax:		Date: Email:	
Name: Telephone:		Title: Fax:		Date: Email:	