**Form UM 1721** Purchasing Services [purchase@umn.edu](mailto:purchase@umn.edu) Revised: November 2020

Departmental Request for Exception to Regents Purchasing Policy

**Not all requests are approved.** Those not approved must participate in a public bid solicitation process.

***Instructions:***

This completed, signed form must be attached to EFS requisitions or PO Change Orders whenever a request is made to Purchasing Services to forego the formal competitive bid or request for proposal (RFP) process for the following commodities and thresholds:

* *Standard goods and services totaling $50,000 or greater*
* *Construction professional services totaling $100,000 or greater*
* *Professional services totaling $50,000 or greater*
* *Construction services totaling $250,000 or greater*

Please include this form, the supplier’s quote, and any other pertinent information as attachments within the EFS requisition or PO change order. Purchasing Services will review the request. Contact Purchasing Services with any questions at: [purchase@umn.edu.](mailto:purchase@umn.edu)

This form is not required if the commodity is listed on the [Non Purchase Order Related Payments](https://policy.umn.edu/finance/purchasing-appd) list. If a PO is created for something on the Non Purchase Order Related Payments list, this form is not required but the justification on the transaction must clearly state that the commodity is on the non PO payments list.

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| **Section A: Executive Summary of Purchase (required)** | | | | | | | | | | |
| Department name (no acronyms) | | | |  | | | DeptID (five digits) | |  | |
| Supplier’s Name | | | |  | | | | | | |
| Describe in concise terms the item(s) or service(s) requested. | | | |  | | | | | | |
| Business justification for this purchase. | | | |  | | | | | | |
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| **Section B: Identify the EFS Transaction Type and ID Number (required)** | | | | | | | | | | |
| **Is this a requisition (new order)?**  **Yes**  **No (If yes, complete the fields listed below.)** | | | | | | | | | | |
| **EFS Requisition ID Number (10 digits)**  **(if known)** | | | **Total Cost for this Supplier** | | | | **One Time Purchase**  **Blanket Order/CPS** | | | |
|  | | | **$** | | | | **Start/End Dates:** | | | |
| **Terms & Conditions**  Supplier has agreed to University’s Terms & Conditions  Supplier has red-lined the University’s Terms & Conditions (may take at least 4-8 weeks to negotiate the contract)  Supplier has provided their own Terms & Conditions (may take at least 4-8 weeks to negotiate the contract)  OGC has already reviewed and approved Terms & Conditions  Other: | | | | | | | | | | |
| **Is this an existing Purchase Order (PO)?**  **Yes**  **No (If yes, complete the fields listed below.)** | | | | | | | | | | |
| **EFS PO ID Number (10 digits)** | | **EFS Requisition ID (10 digits)** | | | **Current Dollar Amount** | **Dollar Amount Being Added** | | **New Total Dollar Amount** | | |
|  | |  | | | **$** | **$** | | **$** | | |
|  | **Explain why the PO must be changed or increased. The** [**PO Change Order Form**](https://policy.umn.edu/sites/policy.umn.edu/files/forms/um1790.docx) **must also be attached on the PO.** | | | | | | | | |  |
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| **Section C: Indicate the Primary Reason for the Exception Request (Required)** | | |
| Select only ***one*** of the options below that best describes the reason why an exception is being requested. Purchasing Services must report all exceptions to the Board of Regents based on the reasons listed below. | | |
| If the reason is one of the options 1-15, Purchasing Services will approve the request, provided the basis for supplier selection and price reasonableness (***Sections D* and *E***) are appropriately justified. | | |
|  | 1 | Software license renewals and software upgrades available only from developer/supplier. This includes adding licenses to an existing license agreement. |
|  | 2 | Service/maintenance agreements with the original manufacturer/developer/supplier for equipment and software. |
|  | 3 | Agricultural commodities such as grain. |
|  | 4 | Closeout or used equipment where the requester or Purchasing Services has verified to be at least 30% below comparable new equipment. |
|  | 5 | Purchase of or access to a uniquely compiled database of information. |
|  | 6 | Unique specification research animals purchased under guidelines of the Institutional Animal Care and Use Committee (IACUC). |
|  | 7 | Goods and services from governmental agencies, universities, or public entities. |
|  | 8 | Development, design, creation of original media such as art, music, and film. |
|  | 9 | Fairview purchases related to research projects. [(See letter on file.)](http://purchasing.umn.edu/docs/FairviewLtr.pdf) |
|  | 10 | Purchases from University Physicians that are not part of sponsored research activities. |
|  | 11 | Entertainers, lecturers, and speakers. |
|  | 12 | Study Abroad Program Administrators. |
|  | 13 | Legal services for the Office of the General Counsel. |
|  | 14 | Search firms that meet pre-defined criteria. [(See Search Firm Criteria.)](http://purchasing.umn.edu/docs/Search%20Firm%20Criteria.pdf) |
|  | 15 | Rare or valuable book collections. |
| **If one of the boxes above has been checked, proceed to *Section E: Reasonableness of Price*** | | |
| **Other Reasons for Requesting an Exception.**  If the reason is one of the options 16-21, Purchasing Services requires sufficient supporting documentation, price reasonableness, and basis for supplier (***Sections D* and *E* of this form**) appropriately justified. Be advised that these requests may  not be approved and may have to be competitively bid. | | |
|  | 16 | **Clinical Trials:** Purchasing products or services for clinical trials. |
|  | 17 | **Supplies from a Previous Supplier:** Purchasing from a previous supplier to ensure consistency of research results. |
|  | 18 | **Brand Compatibility:** Equipment or supplies that requires brand compatibility with existing equipment. *NOTE:* must be available only from the manufacturer or their sole authorized distributor. |
|  | 19 | **External Funding:** The external funding source or federal granting agency has specified this supplier in the awarded grant. The awarded grant application or award notice must be included as required supporting documentation. Internal University funding sources are ineligible for this reason for an exception. |
|  | 20 | **Emergency:** Threat to health or safety, Significant loss to the University, Emergency repairs and parts or emergency facility repairs under $100,000. |
|  | 21 | **Other** (describe): |

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| **Section D: Basis for Supplier Selection (Required)** |
| *Explain below the relevant factors of (a) how and (b) why this supplier was selected.* |
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| **Section E: Reasonableness of Price (Required)** |
| In the absence of competitive bid/proposal prices, how can you be assured that the price quoted by the single supplier is reasonable? All purchases must withstand public scrutiny. Both questions below must be fully answered. |
| **Question #1: List the Basis for the Price. (Required)**  How did you arrive at the price/cost? Is this a published price per unit (goods), or is the price calculated on a breakdown of tasks  and hours with hourly rates (services)? Provide a breakdown of the costs listed below. |
|  |
| **Question #2: Describe the Assurance of a Reasonable Price. (Required)**  Describe how the University is getting good value (reasonable price) for the item(s) or service(s). Did you negotiate with the supplier or was the price compared to other published prices for similar goods or services? Did you compare this price with a  similar purchase from a different supplier? Did you receive the supplier’s estimate and verify the rates are consistent with current market rates? |
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**Section F: Certification from Requester & Signature Approvals (Required)**

Complete the required information below according to the selected exception category and total dollar amount of the purchase. All signatures of approval must be obtained before Purchasing Services will begin its review process.

## Requester’s Certification:

I have prepared this form and confirm that the information is complete and accurate to the best of my knowledge and belief. I certify that to my knowledge, no elected or appointed official or employee of the University of Minnesota has benefited or will benefit financially or materially from this purchase. The purchase contract may be terminated by the University of Minnesota if it is determined that gratuities of any kind from the supplier, its agents, or its employees were either offered to or received by any of the aforementioned individuals at the University of Minnesota.

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| --- | --- | --- | --- |
| **Typed Name** |  | **Signature** |  |
| **University Title** |  | **Email** |  |
| **Phone Number** |  | **Date** |  |

## Department Head’s Approval Signature:

I have reviewed and hereby authorize this purchase per University policy and any applicable sponsored guidelines:

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| --- | --- | --- | --- |
| **Typed Name** |  | **Signature** |  |
| **Email** |  | **Date** |  |

## Dean or Administrative Vice President’s Approval Signature: ($250,000 or greater)

I have reviewed and hereby authorize this purchase per University policy and any applicable sponsored guidelines:

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| **Typed Name** |  | **Signature** |  |
| **Email** |  | **Date** |  |

**Does this purchase require Board of Regents Approval ($5,000,000 and over)?** Yes

Anticipated date of meeting:

# Section G: Purchasing Services’ Use Only: Final Signature & Verification of Purchase

***This section must be left blank by departments*.** If the exception is approved, Purchasing Services will obtain the signatures required below and update the EFS requisition or PO with the fully signed form. This will cause the transaction to re-route for approvals in EFS.

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| **Approval Type** | **When Required** | **Signature** | **Date** |
| **Category Manager** | All exceptions. |  |  |
| **Director or Associate Director** | All exceptions #16-21.  Exceptions #1-15 $250,000 and over |  |  |
| **Controller** | All exceptions #16-21 $250,000 and over. |  |  |