

For PD Use Only LTB #: _____ Approved \$: _____
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LIMIT TO BRAND (LTB) OR TRADE NAME STATEMENT

For use on all Information Technology (IT) and Non-IT goods acquisitions.

This justification document consists of two (2) pages. The LTB applies to the following methods of purchasing: competitive solicitations (informal/formal) and SB/DVBE Option.

Requesting Department Information			
Agency:			
Department:			
Address:			
City:		State:	Zip Code:
Agency Billing Code:			
Department Representative			
Contact/Buyer's Name		Technical Contact Name	
Name:		Name:	
Telephone:		Telephone:	
E-Mail:		E-Mail:	
Contract Information			
Contract Type: <input type="checkbox"/> Non-IT Goods <input type="checkbox"/> IT Goods			
Brand:		Model:	
Description of Commodity: (Use additional space as necessary, but signatures must stay fixed to the first page)			
Original Contract Amount Excluding:* \$ <small>(Includes original contract and previously approved amendments)</small>	Total Original Contract Amount: \$ <small>(Includes original contract and previously approved amendments)</small>	Amendment Amount: <small>(if applicable)</small> \$ <small>(Current amendment only)</small>	Amended Contract Amount: \$ <small>(Includes original contract and all amendments, including current amendment)</small>
Requesting Department <input type="checkbox"/> Approved <input type="checkbox"/> Denied _____ Signature of Director or Designee / Date _____ Print Name of Director or Designee		Department of General Services <input type="checkbox"/> Approved <input type="checkbox"/> Denied _____ Signature of Director or Designee / Date _____ Print Name of Director or Designee	

*Excluding sales and use tax, finance charges, postage and handling. Shipping charges are also excluded from the dollar threshold limits unless the shipping charge is included in the evaluation such as Free On Board (FOB) Origin, Freight Collect or FOB Destination.

Submit completed original form to:
 Department of General Services, Procurement Division
 Dispute Resolution Unit
 707 Third Street, Second Floor
 West Sacramento, CA 95605

Signature Instructions: This form requires the approval by the highest ranking executive officer or designee. The typed name and signature must match. The department director may delegate review and approval authority to his/her deputy directors and/or the Procurement and Contracting Officer. The designee shall send ratification notification to their director upon approval of the LTB transaction.

NOTE: Pursuant to SAM 3555 purchase estimates submitted without adequate information in support of limiting competitive bidding will be returned to the originating agency. For the purposes of this statement, “adequate” is defined as substantive information or data. Any missing information may delay the processing of this request or result in the return of this form to the customer agency pursuant to SAM 3555.

Complete responses must be provided for all the following items.

THE COMMODITY REQUESTED IS RESTRICTED TO ONE BRAND NAME FOR THE REASONS STATED BELOW:

- 1. What are the unique performance factors of the product specified?**
(List each factor individually with an explanation of its purpose.)

- 2. Why are these specific factors required?**

- 3. What other products have been examined and rejected and why?**