

For PD Use only NCB #:

NON-COMPETITELY BID (NCB) CONTRACT JUSTIFICATION

For use on all information technology (IT) and non-IT goods and services acquisitions.
Attach to Std. 65, Std. 66 or Std. 821, as applicable.

This justification document consists of two (2) pages. All information must be provided and all questions must be answered. The "Required Approvals" section must include a date for each signature, as appropriate for the transaction.

Requesting Department Information			
Agency:	Department:		
	(*Includes Boards, Commissions, and Associations)		
Institution (if applicable):			
Department Contact Information			
Contact Name:	Street Address:		
Telephone: ()			
FAX: ()	Mailing Address:		
E-Mail:			
Required Contract Information			
Contractor Name:			
Contractor Address:			
Original Contract Amount:* \$ <small>(*Includes original contract and previously approved amendments)</small>	Amendment Amount:* (if applicable) \$ <small>(*Current amendment only)</small>	New Contract Amount: * \$ <small>(*Includes original contract and all amendments, including current amendment)</small>	Has work commenced? <input type="checkbox"/> Yes <input type="checkbox"/> No Have goods been acquired? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>Attach explanations for any "Yes" answers.</small>
Provide a brief description of the acquisition, including all goods and/or services the contractor will provide:			
Contract Type and Term			
Contract Type: Select One: <input type="checkbox"/> Non-IT Goods <input type="checkbox"/> Non-IT Service <input type="checkbox"/> IT Goods <input type="checkbox"/> IT Service <input type="checkbox"/> IT Goods & Services	Contract Term: Begin: _____ End: _____ Explain late contract submittal (services only):	Type of Award: CMAS: _____ Master: _____ Competitive: _____ Form 42: _____	Will this transaction be financed? No _____ Yes _____ If yes, attach the Statement of Compliance to the State Financial Marketplace to this form
Required Approvals			
Department <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Agency <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Dept. of General Services <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
MUST HAVE SIGNED BY HIGHEST RANKING EXECUTIVE OFFICER OR DESIGNEE.			
_____ Signature of Director or Designee/Date	_____ Signature of Agency Secretary or Designee/Date	_____ Signature of Director or Designee/Date	
_____ Type Name of Director or see Instructions	_____ Type Name of Agency Secretary or see Instructions	_____ Type Name of Director or Designee	

Remit completed form to:
Procurement Division
One-Time Acquisitions
707 Third Street, 2nd Floor, MS: 201
West Sacramento, CA 95605

Signature Instructions for Agencies with an Agency Secretary

This form requires approval by Agency Secretary or Agency Undersecretary or Designee **and** the Director or Chief Deputy. The typed name and signature must match. The Agency Secretary may designate one person, in addition to Agency Undersecretary, to sign on his/her behalf, of cabinet officer level (e.g., Assistant Undersecretary, Deputy Secretary, etc., the actual title is dependent upon the Agency's organizational structure).

Signature Instructions for Agencies that do not have an Agency Secretary

This form requires approval by the highest ranking executive officer or designee. The typed name and signature must match. The highest ranking officer may designate one person to sign on his/her behalf subject to DGS approval.

Complete responses must be provided for all of the following items.

A. THE GOOD/SERVICE REQUESTED IS RESTRICTED TO ONE SUPPLIER FOR THE REASONS STATED BELOW:

1. Why is the acquisition restricted to this good/service/supplier?

(Explain why the acquisition cannot be competitively bid. Explain if this is an emergency purchase or how the supplier is the only source for the acquisition and reference the PCC that applies, i.e., 12102, 10301/10302, or 10340.

Please provide an accurate, detailed justification with as much information as possible to support the request. If it is to match and inter-member with existing equipment, is it the only manufacturer you could find? Do they have authorized distributors?

2. Provide the background of events leading to this acquisition.

Please provide a detailed statement of events leading to this purchase. Any extraordinary circumstances, new laws or legislation, any attempts to purchase competitively and failed etc.

3. Describe the uniqueness of the acquisition (why was the good/service/supplier chosen?)

Please provide a detailed response as to what is different that this supplier does that no one else is able to do or explain the type of work you are trying to perform and any difficulties or challenges that you are facing that this equipment would be able to assist you with. Describe any background on the supplier and why it has been determined to be bought from this source.

4. What are the consequences of not purchasing the good/service or contracting with the proposed supplier?

Provide any information regarding the repercussions of not purchasing this item. Is there any legal issues, additional costs to the State for not having the equipment?

5. What market research was conducted to substantiate no competition, including evaluation of other items considered?

(Provide a narrative of your efforts to identify other similar or appropriate goods/services, including a summary of how the department concluded that such alternatives are either inappropriate or unavailable. The names and addresses of suppliers contacted and the reasons for not considering them must be included OR an explanation of why the survey or effort to identify other goods/services was not performed.)

Provide as detailed report as possible documenting all the previous research that has been conducted to find other alternative sources, their responses to what the agency needs, contact information for who you were working with. The more research reported the more helpful to get NCB approved. PLEASE BE SURE THAT INFORMATION HAS BEEN UPDATED AND IS CURRENT. Especially regarding market surveying.

B. PRICE ANALYSIS

1. How was the price offered determined to be fair and reasonable?

(Explain what the basis was for comparison and include cost analyses as applicable.)

Provide cost analysis, whether there is any historical cost data, market value, trade in. If this is the only supplier, how has the cost of this item been deemed fair and reasonable?

2. Describe any cost savings realized or costs avoided by acquiring the goods/services from this supplier

Please describe if there are cost savings such as significant trade-in allowances for equipment that will save the State money or if the item will make things run smoother or more efficiently for the State and eliminate wasted time or efforts.

Non-Competitively Bid (NCB) Contract Justification Corrective Action Plan

This section must be completed for any NCB that could have been competitively bid but was not due to insufficient time to complete the competitive acquisition process. This does not apply to emergency procurements in accordance with PCC Sections 10302, 10340(b)(1) and 12102(a)(2).

Complete responses must be provided for all of the following questions:

1. Why is the submission of a NCB necessary and what are the determining factors that caused the problem?

Explain why your department has not conducted a competitive bid. Provide the background of events (timeline) leading to the submission of this NCB. Identify any critical time delays or issues that prevented your department from completing this acquisition using a competitive process (i.e., budget, approvals, and/or appropriate analysis).

2. What are the consequences of not having this NCB approved?

Describe in detail the impact to the department and to the program(s) if the NCB is not approved.

3. How will your department ensure adequate planning to prevent submittal of NCB's for goods or services that should have been competitively bid?

Provide a detailed plan of your department's efforts to improve your acquisition planning to maximize the use of competition to meet your needs. This plan must include how the department will provide for a tracking system to ensure timely review of upcoming requirements. Departments acknowledge that submission of a corrective action plan is the basis for how the department will provide for sufficient time to use competition in the acquisition process. Failure to follow the Corrective Action Plan may result in the loss of your department's delegated procurement authority. This plan must be kept on file for future auditing purposes.