

Purchasing Authority Application

See the State Contracting Manual (SCM) Volume 2, Chapter 1 for instructions on completing the application.

Section 1 – General Information

DELEGATED PURCHASING AUTHORITY REQUEST FOR:		PROCUREMENT SYSTEM:
Department:		<input type="checkbox"/> Centralized Purchasing <input type="checkbox"/> Decentralized Purchasing
<input type="checkbox"/> Non-IT Goods		<input type="checkbox"/> IT Goods & Services
<input type="checkbox"/> Minimum <input type="checkbox"/> Standard <input type="checkbox"/> Formal		<input type="checkbox"/> Minimum <input type="checkbox"/> Standard <input type="checkbox"/> Formal

Section 2 – Department Contact Information

	PCO	Non-IT PAC	IT PAC
Name			
Division/Section/Unit			
Mailing Address			
Phone & Fax			
E-mail			

My signature certifies that 1) I understand and commit to the responsibilities (as defined in the Statement of Commitment) as the department's Procurement and Contracting Officer (PCO) and/or Purchasing Authority Contact (PAC); and 2) I have assessed and determined that my department meets all requirements as specified in the State Contracting Manual and the Public Contract Code (PCC) for the requested purchasing authority dollar threshold levels.

1.	<i>Signature of Procurement & Contracting Officer (must match the name above)</i>	<i>Date</i>
2.	<i>Signature of Non-IT Purchasing Authority Contact (must match the name above)</i>	<i>Date</i>
3.	<i>Signature of IT Purchasing Authority Contact (must match the name above)</i>	<i>Date</i>

Section 3 – Required Attachments

<input type="checkbox"/>	Attachment 1 – Procurement Policies and Procedures Manual Checklist
<input type="checkbox"/>	Attachment 2 – Procurement Policies and Procedures Manual
<input type="checkbox"/>	Attachment 3 – DGS Bill Codes
<input type="checkbox"/>	Attachment 4 – Unreported Purchasing Authority Transactions <i>(If applicable)</i>
<input type="checkbox"/>	Attachment 5 – Audits <i>(If applicable)</i>
<input type="checkbox"/>	Attachment 6 – Secondary Department <i>(if applicable)</i>
<input type="checkbox"/>	Attachment 7 – Statement of Commitment (PCO & PAC)
<input type="checkbox"/>	Attachment 8 – Staffing

DGS/PAU USE ONLY

Received By: _____
Analyst Initials

Received On: _____

DATE STAMP HERE

Purchasing Authority Application

INSTRUCTIONS

General: A department must complete and submit a Purchasing Authority Application (PAA) when it is requesting new delegated purchasing authority.

SECTION PROCEDURES:

Section 1 – General Information

- Give the name of the Department making the request for delegated purchasing authority.
- Indicate the type of procurement system utilized by the Department
- Mark the type of request this application is for:
 - New purchasing authority request for non-IT goods and/or IT goods and services
 - Select one of the competitive dollar threshold categories: minimum, standard, or formal.

Section 2 – Department Contact Information

Provide contact information for the Department's Procurement and Contracting Officer (PCO); and Department's Non-IT and IT Purchasing Authority Contact.

Section 3 – Required Attachments

Provide all of the required attachments identified in this section. The PAA and all required attachments must be submitted together unless a required attachment is waived by the DGS/PD Purchasing Authority Unit.

– Attachment 1 - Procurement Policies and Procedures Checklist

The Desktop Manual Checklist can be found [HERE](#). Upon submission of the application, ensure that the checklist has been completely filled out, identifying the corresponding page numbers of your Policies and Procedures Manual to the requirements on the checklist.

– Attachment 2 - Procurement Policies and Procedures (Desktop Manual)

The Department's Desktop Manual must be submitted via Email or attached on a CD-ROM. The manual must be in MS Word and unlocked for editing.

– Attachment 3 - DGS Bill Codes

The department must submit a list of all DGS bill codes it will use under its purchasing authority.

– Attachment 4 - Unreported Purchasing Authority Transactions (if applicable)

If the department has unreported transactions, a copy of the unreported transactions must be attached to the application.

– Attachment 5 - Audits (if applicable)

Provide any and all audit reports for the previous five (5) years. Reports include, but are not limited to, those prepared by the DGS Office of Audit Services, Bureau of State Audits, and departmental internal audits. If your department is not submitting any audits please select one of the following: No Audits have been performed Audit report not yet available

– Attachment 6 – Secondary Department (if applicable)

Identify the department requesting purchasing authority (Primary Department) who will conduct procurement activities for another department (Secondary Department). The Secondary Department will provide a written justification explaining the need for a Primary Department to conduct procurements on their behalf.

– Attachment 7 – Statement of Commitment

The Procurement and Contracting Officer (PCO) and the Purchasing Authority Contact (PAC) for non-IT and IT must sign a Statement of Commitment agreeing to adhere to the Purchasing Authority program requirements as stated on the commitment form.

– Attachment 8 – Staffing

Provide an organizational chart identifying all procurement staff within your department, including the numbers of years of procurement experience of staff and any procurement training they have completed. This chart shall include the reporting structure for non-IT staff, IT staff, PACs and PCO.

Purchasing Authority Application Secondary Department Information

PRIMARY DEPARTMENT PCO – General Information

Department:			
CURRENT PURCHASING AUTHORITY NUMBER(S), IF APPLICABLE:			
Non-IT Goods:		IT Goods and Services:	
PCO Name			
Title & Classification			
Office			
E-mail			
<p><i>My signature certifies that 1) I understand and commit to the responsibilities (as defined in the State Contracting Manual) as the department's Procurement and Contracting Officer (PCO) and 2) I have assessed and determined that my department meets all requirements as specified in the State Contracting Manual and the Public Contract Code (PCC) for the requested purchasing authority dollar threshold levels.</i></p>			
1. _____		_____	
<i>Signature of Procurement & Contracting Officer (must match the name above)</i>		<i>Date</i>	

SECONDARY DEPARTMENT PCO – General Information

Department:			
Name			
Title & Classification			
Office			
E-mail			
<p><i>My signature certifies that I, the Procurement & Contracting Officer, affirm my understanding that the department <u>has not</u> been granted purchasing authority under this application and that the purchasing authority will be granted to the Primary Department identified above, which will conduct the procurement activities.</i></p>			
2. _____		_____	
<i>Signature of Procurement & Contracting Officer (must match the name above)</i>		<i>Date</i>	

SECONDARY DEPARTMENT – JUSTIFICATION

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