



**Department of Purchasing and Contracting  
NON-COMPETITIVE PROCUREMENT REQUEST FORM**

Requesting Department: Information Technology  
 Department Contact Person: Angela Green Telephone: (404) 371-2374  
 Email: adgreen@dekalbcountyga.gov

Requisition Number: \_\_\_\_\_ Suggested Supplier: Hewlett Packard  
 Estimated Amount of Purchase: \$245,327.64  
 Detailed Description of the Goods or Services to be purchased: 2017 Annual Software License, Software and Maintenance Support.

**Emergency** (For Emergency Requests, Please check this box and answer all questions below.)

1. Date and Time of Emergency Occurrence: \_\_\_\_\_

2. Please state the nature of the emergency posing a risk to public health, welfare, safety or resources:

\_\_\_\_\_

3. State how the Estimated Amount was determined to be Fair and Reasonable (attach supporting documentation):

\_\_\_\_\_

**Sole Source**     **Single Source** (Please check **one** box and answer all of the following completely.)

1. Provide an explanation why the product, service or supplier requested is the only method that can satisfy the requirements. Please explain why alternatives are unacceptable. Be specific with regard to specification, features, characteristics, requirements, capabilities and compatibility. (Attach additional documents, if necessary.):

HP products and services are proprietary to their manufactured equipment. DeKalb County utilizes HP services to cover server maintenance and proprietary software licenses used in support of all County business units. Support can only come through HP.

2. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?) Explain in detail.

Yes, as long as the county continues to use Hewlett Packard solutions, it will obligate us to Hewlett Packard for future maintenance and support costs. HP software is proprietary.

3. Explain the impact to the County or Public if this request is not approved.

If this maintenance contract is not renewed, and should an issue arise with any of the equipment/software that is covered under this contract; it would have an adverse impact on the County; and would impact our ability to ensure continuity of operations.

I hereby request that this non-competitive procurement request be approved for the purchase of the above stated work, material, equipment, commodity, or service.

Department Director (Typed/Printed Name) John Matelski

Signature: [Signature] Date: 6/16/17

**Do Not Write Below – for the Department of Purchasing and Contracting Use Only**

**Recommendation and Comments**

Because this software is proprietary, the accompanying products and services are exclusive to this vendor. This should be purchased as a Sole Source using the pricing of SWC 90813. RW 06/23/2017

Approved     Not Approved

Signature: [Signature], Director, Department of Purchasing and Contracting Date: 6/26/17