

MONTCLAIR STATE UNIVERSITY

EMERGENCY PROCUREMENT JUSTIFICATION AND APPROVAL FORM

EMERGENCY PURCHASES ARE NOT PERMITTED EXCEPT WHEN CLEARLY AND THOROUGHLY JUSTIFIED.

Requested By: _____

Department: _____

Prepared By: _____

Date: _____

1. Estimated contract amount: _____
2. Supplier name, address, and contact information: _____

3. Description of requested items or services and their purpose(s): _____

4. Reason(s) for requesting an emergency purchase:
 - There exists an immediate threat to public health.
 - There exists an immediate threat to public welfare.
 - There exists an immediate threat to public critical economy and efficiency.
 - There exists an immediate threat to public safety.
 - None of the above applies. (Please attach a detailed explanation and justification for this emergency request)
5. Below, please provide the basis for the determination of this emergency purchase and/or the selection of the particular contractor. Be specific with regard to specifications.

I hereby certify that, to the best of my knowledge, the above justification is accurate and request approval for the procurement of the above requested items or services.

Department Head Signature: _____

Based upon the determination, the proposed procurement action is being procured pursuant to the authority of N.J.S.A.40A:11-6 (Local Public Contracts Law); N.J.S.A. 18A:18A-7 (Public School Contracts Law) and N.J.A.C.5:34-6.1 New Jersey Code of laws.

THIS SECTION RESERVED FOR PURCHASING DEPARTMENT ONLY

PO NUMBER: _____

EMERGENCY ORDER NUMBER: _____

Approved

Denied Reason for denial: _____

Vice President for Facilities

Vice President for Finance

Date: _____

Date: _____

Assistant Vice President of Procurement

Date: _____