Requisition #: R00\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PO# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contracts for supplies, equipment or services of consultants or independent contractors requiring the expenditure of funds in excess of $10,000 shall be awarded on the basis of competitive bids. However, in the case of contracts requiring highly specialized service or other circumstances for which a public bid would not be appropriate, a waiver of the bid requirement may be submitted for approval.

To make a request for bid waiver, please complete the following information and submit to Purchasing Department:

**Vendor/Consultant Name:** Click here to enter text.

1. Are any employees of Detroit Mercy employed by, owners or principals of the consulting organization? Yes [ ]  No [ ]

2. Does any Detroit Mercy employee have any financial or personal interest in the consulting organization? Yes[ ]  No [ ]

If yes to 1 or 2:

 List employee name: Click here to enter text.

Has a conflict of interest disclosure statement been submitted in accordance with the Detroit Mercy policy?

 Yes [ ] No [ ]  If no, refer to the following link:

<https://www.udmercy.edu/hr/forms/documents/Conflict%20of%20Interest%20and%20Code%20of%20Ethics.doc>

**Description of item or service being requested:**

Click here to enter text.

**Justification for waiver of bid:**

Click here to enter text.

**Waiver Amount: $** Click here to enter Amount.

**FOAPAL:** enter fund.- enter org code- enter account number- enter activity

Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorizations:**

Dean/Department Head: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Procurement Services: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Budget:(Grants): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if applicable)

Controller: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\* Please attach quote to your Bid Wavier\*\*\*\***