

SERVICE PROVIDER PROCUREMENT REQUEST FORM

INSTRUCTIONS FOR COMPLETION

The Service Provider shall ensure all Procurement Requests forms are filled out completely to avoid delays in processing. All Procurement Requests must be submitted to SFWIB not later than sixty (60) days prior to the contract termination date. Procurement Requests received after the specified timeline will not be processed.

□ SECTIONS I and II

Procurement requests for information technology or/and Procurement requests for facility-related must be submitted separately. Please do not combine requests on same form.

The Service Provider shall:

- 1) Complete sections I and II of the Service Provider Procurement Request Form
- 2) Attach Justification or Reason for each request being submitted
- 3) Forward the original completed procurement request form(s) signed and dated by the Service Provider's Executive Director to the SFWIB's Contract Unit

□ SECTION III

The SFWIB's Contracts Unit shall:

- 1) Review amount budgeted
- 2) Identify and complete Service Provider's index code
- 3) Sign the form and forward to the Finance Unit

The SFWIB's Finance Unit shall:

- 1) Identify and complete available funding
- 2) Identify and complete budget line item #
- 3) Sign and forward request form to Information Technology Unit or Facility Management Unit

The SFWIB's Information Technology Unit or Facility Management Unit shall:

- 1) Complete the Procurement process in accordance with the SFWIB's internal procedures
- 2) Process the Procurement Request within approximately 4-6 weeks

□ SECTION III

Approvals

- 1) Procurement package is forwarded for signature:
 - A. Assistant Director for Administration
 - B. Assistant Director for Finance
 - C. Executive Director, SFWIB

FROM PROCUREMENT TO ACQUISITION OF GOOD or SERVICE

- 1) If amount of purchase exceeds budgeted amount, the request must be returned to the Contracts Unit.
- 2) The SFWIB shall keep the Service Provider apprised of the status of the procurement activity.
- 3) Only the SFWIB will contact the selected vendor to arrange the date for the delivery of the good or date service will begin.



SERVICE PROVIDER PROCUREMENT REQUEST FORM

SECTION I TO BE COMPLETED BY SERVICE PROVIDER

Date: _____

Service Provider: _____ Service Location: _____

Address: _____ Address: _____

Contact Person: _____ Contact Person: _____

SECTION II TO BE COMPLETED BY SERVICE PROVIDER

QTY	ITEM DESCRIPTION (Attach Additional Sheet If Necessary)	G/L ACCT.	PROGRAM	FUNDING SOURCE

FUNDING SOURCE / PROGRAM: _____ (Specify)

JUSTIFICATION FOR REQUEST – (ATTACH SEPARATE SHEET)

Executive Director Approval: _____ Date: _____

SECTION III INTERNAL REQUEST FOR APPROVAL

SFWIB USE ONLY FOR IDENTIFICATION AND ALLOCATION OF FUNDS FOR PROCUREMENT

CONTRACTS UNIT

INDEX CODE # _____

AMT BUDGETED: \$ _____

SIGNATURE

DATE

FINANCE UNIT

AVAILABLE FUNDING: \$ _____

BUDGET LINE ITEM # : _____

SIGNATURE

DATE

REQUEST FOR:

SOFTWARE OR HARDWARE
SFWIB Information Technology (IT) Unit Manager

SIGNATURE

DATE

FURNITURE/EQUIPMENT/SERVICE

Facilities Unit Manager

SIGNATURE

DATE

If Request by Others

Divisional Request

SIGNATURE

DATE

APPROVALS

ASSISTANT DIRECTOR, ADMINISTRATION

SIGNATURE

DATE

ASSISTANT DIRECTOR, FINANCE

SIGNATURE

DATE

EXECUTIVE DIRECTOR, SFWIB

SIGNATURE

DATE