



MODIFICATION (WAIVER) REQUEST

Table with columns: Requesting Department & Division, Contact Name, Telephone #, Department Head Signature, Date, Original RQ #, Estimated Cost, and Is this Procurement State or Federally funded? YES/NO

Reason for Modification Request:

Please complete this form and attach all supporting documents. Give complete, accurate, detailed explanation of your request. Please be specific.

Sole Source: The purchase of a commodity or service from the only known single source. Attach verification. Code Provision: 53.50.090 (c)

Class 2 Emergency: A circumstance that poses a threat to the health, welfare or safety of the public. Code Provision: 53.50.090 (L)

Rider to Another Contract: A vendor may extend another government agency's bid or contract pricing to CBJ. The proposed purchase must meet CBJ purchasing requirements and must have been competitively bid. Code Provision: 53.50.090 (f) Agency: Contract #:

No Substitute: A request for a specific brand name and model number of a particular item to be purchased. The item must be available from more than one supplier.

Other: Clear explanation is required. Code Provision: (if applicable) Explanation:

Approved By:

Renée Loree 7/11/22
Purchasing Officer Date

City Manager Date

Table with 5 columns: FY, RQ, \$ Amount, PO #, Purchasing Approval

Purchasing Officer Comments:

Expiration Date: