



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

Emergency procurements address immediate and unforeseen situations that require action to protect life, property, or critical university operations. This form is typically completed after the emergency response has occurred, documenting justification for the non-standard procurement. If your request does not meet one of the listed criteria, it is not considered an emergency procurement under USM policy.

Complete all sections of this form and email the completed form and a copy of the quote(s) to your [designated Procurement contact](#).

Requesting Department/Office: _____

Division: _____

Prepared By: _____

Date: _____

1. Total Expense (if known): \$ _____
2. Anticipated dates of service (start and end dates): _____
3. Supplier name, address, and contact information: _____

4. Description of requested items or services and their purpose(s) (service-based emergencies (e.g. urgent remediation, IT support, etc.) are acceptable: _____

5. Reason(s) for requesting an emergency purchase:

| | |
|--------------------------|--------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | A condition threatens the health or safety of any person(s) or animal(s) (e.g., loss of power, water leak) |
| <input type="checkbox"/> | A condition threatens the preservation or protection of property (e.g., hazardous spill, water leak, storm damage) |
| <input type="checkbox"/> | A condition threatens the continuance of necessary University functions (e.g., IT system failure) |
6. List the types and quantities of items or services, or the time period necessary, to address the immediate threat. Note: this request should not be used to fulfill long-term requirements. _____

7. Provide the basis for the determination of this emergency purchase and provide the rationale for selection this supplier. Include specific details, such as required specifications, qualifications, or unique capabilities. _____

8. Describe the efforts made to solicit competition, if applicable. If a sole source supplier was selected, include justification and attach the appropriate sole source documentation. If multiple quotes were solicited, include them with this submission.

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: _____ Date: _____

Based upon the determination, the proposed procurement action is being procured pursuant to the authority of University System of Maryland Procurement Policies and Procedures Section V, E (Emergency Procurement).

THIS SECTION RESERVED FOR PROCUREMENT AND STRATEGIC SOURCING ONLY

PO/CONTRACT NUMBER: _____

☐

Approved

☐

Denied

Reason for denial: _____

Procurement Officer Signature

Date: _____