**Emergency Purchase Justification**

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| **General Information** | Date: |
| Department: | Phone No.: |
| Contact Name: | Email: |

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| **Vendors Solicited** | Requisition No.: |
| 1. | Purchase Order No.: |
| 2. | Contract No.: |
| 3. |  |

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| **Description.** Please provide a description of the situation that is causing the emergency purchase. |
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| **Type.** Please select one of the options and explain below. |
| □ Threat to Health □ Damage to City Property □ Other, please explain: □ Threat to Safety □ Serious Operational Disruption \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Explanation:** How will the City be damaged/affected by the situation? What are the possible consequences of not acting on the purchase quickly? |

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| **Other:** Is there a contract that can prevent this type of emergency purchase in the future? |
| Please explain. |

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| **Department Recommendation** |
| Requestor: | Date: |
| Department Director: | Date: |

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| **Chief Procurement Officer’s Approval** |
| Signature: | Date: |