

Justification to Add Work Scope to an Existing Award

Please type or print information clearly

Exception to Requirement for Re-Competition - modifications that add work scope under the existing order/subcontract require sufficient rationale to justify the continued use of the vendor rather than competing the effort.

| | |
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| 1. Purchase Request Number for Additional Work Requirements | 2. Existing Order/Subcontractor Number |
|---|--|

This completed form is required when either of the following conditions exist (and are checked below):

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|---|
| 3. Existing Conditions |
| <input type="checkbox"/> The total estimated value of the scope increase is expected to exceed \$30,000 OR |
| <input type="checkbox"/> The cumulative total value/not to exceed (current award plus the total estimated value of scope increase) is expected to exceed \$1,000,000. |

Complete the following information and answer all questions

| | |
|-----------------------|--|
| 4. Recommended Vendor | 5. Total Estimated Value of Scope Increase |
|-----------------------|--|

Vendor Contact

| | | | |
|---------------|--------------|---------------------|-------------------|
| 6. First Name | 7. Last Name | 8. Telephone Number | 9. E-mail Address |
|---------------|--------------|---------------------|-------------------|

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| 10. Description of services and/or supplies to be provided under this modification |
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Questions

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| 11. Describe the vendor's performance to date and the impact if the work is changed to another vendor. |
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| 12. What capability does this vendor have that is necessary for a continuation of this specific effort that makes it clearly the <u>only vendor that can perform this work?</u> Describe. |
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13. Is competition precluded by contract specifications? Describe.

14. Is competition precluded due to copyrights, patent rights, trade secrets, or other intellectual property, technical or proprietary data? If so, describe specifically.

15. Other factors not considered above. Describe.

Please type or print information clearly

Requester Certification (person receiving the product/service)

In submitting this recommendation for the non-competitive increase in scope described herein, I recommend, based on my knowledge, and analysis of the market, that only the vendor indicated above should perform/supply the additional scope contemplated for this project.

SAIC-Frederick is committed to conducting its business and procurement activities in accordance with all applicable federal, state and local laws and regulations and in accordance with the highest standards of business ethics. As such, all SAIC-Frederick employees are expected to comply with and assist the company in complying with these obligations.

By my signature, I certify that in submitting this single/sole source justification for the procurement of goods/services from the vendor, that at all times:

1. I have complied with both the SAIC Corporate Policy SG-1, "Standards of Business Ethics and Conduct" (<https://issaic.saic.com/policy/ah/sh/01.html>) and the SAIC Code of Conduct (<https://issaic.saic.com/ethics/code/>);
2. I have not been offered or received any incentive or inducement, including but not limited to gifts, offers of future employment or anything of monetary value, as a part of this procurement; and
3. I have disclosed and reported any private business or professional activities that I have engaged in, including those with a direct or indirect financial interest with the vendor, that could create a conflict of interest or the appearance of a conflict of interest.

Requester's information (person receiving the product/service)

| | | |
|----------------|---------------|-----------|
| 16. First Name | 17. Last Name | 18. Title |
| 19. Signature | | 20. Date |

This section for SAIC-Frederick, Inc., Procurement

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|--------------------------------|
| 21. Reason for non-concurrence |
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Buyer/Subcontract Specialist information

| | | |
|--|---|-----------|
| 22. First Name | 23. Last Name | 24. Title |
| 25. Signature | 26. Concurrence <input type="checkbox"/> Yes <input type="checkbox"/> No | 27. Date |
| 28. Reasons for <u>non-concurrence</u> | | |

Manager information

| | | |
|--|---------------|-----------|
| 29. First Name | 30. Last Name | 31. Title |
| 32. Procurement Manager Signature (Procurement director if aggregate exceeds \$1,000,000.) | | 33. Date |

1. Enter purchase request number.
2. Enter the existing order/subcontract number that is being modified.
3. Check the appropriate box(es) after reading the requirement.
4. Enter the name of the recommended vendor.
5. Enter the total additional dollar amount, estimate or actual.
6. Enter the first name of the proposed vendor contact.
7. Enter the last name of the proposed vendor contact.
8. Enter the telephone number of the vendor contact.
9. Enter the e-mail address of the vendor contact.
10. Enter a brief description of the services and/or supplies being proposed as a modification to the current contract.

Questions:

11. Describe the performance of the current vendor to date and discuss the impact any change to a different vendor would make in terms of budget, time and any other pertinent information.
12. Describe the unique capabilities this vendor has for this specific additional work scope. Include any other vendors considered, if applicable, and describe what factors led you to reject them and select the recommended vendor.
13. Describe any specifications in the current contract that precludes consideration of any other vendor.
14. Describe any reasons precluding competition such as copyrights, patent rights, trade secrets, or other intellectual property, technical or proprietary data.
15. Describe any other pertinent reasons not previously addressed that led to your vendor determination.
16. Enter the first name of the person receiving the product/service.
17. Enter the last name of the person receiving the product/service.
18. Enter the title of the person receiving the product/service.
19. Enter the signature of the person receiving the product/service.
20. Enter the date the person receiving the product/service signed this document.
21. SAIC-Frederick, Inc., Procurement staff to enter the reason for non-concurrence.
22. Enter the first name of the buyer/subcontract specialist.
23. Enter the last name of the buyer/subcontract specialist.
24. Enter the title of the buyer/subcontract specialist.
25. Enter the signature of the buyer/subcontract specialist.
26. Buyer/subcontract specialist checks yes to agree or no to disagree with the program area recommendation.
27. Enter the date the buyer/subcontract specialist signed this document.
28. Enter the reason for disapproval.
29. Enter the first name of the manager.

30. Enter the last name of the manager.
31. Enter the title of the manager.
32. Enter the signature of the procurement manager; if aggregate dollar amount of current award plus the total estimated value of the scope increase exceeds \$1M, the signature will be of the Procurement Director.
33. List the date the procurement manager/director signed this document.