

Nebraska Crime Commission Equipment Procurement Certification

See page two to view full instructions for completing this form.

GRANTEE/SUBGRANTEE:	GRANT NUMBER:
PROJECT TITLE/PROGRAM NAME:	PROJECT PERIOD FROM: TO:
PREPARED BY:	
DATE:	PHONE:

EQUIPMENT TO BE PURCHASED: Equipment is defined as tangible personal property with an acquisition cost of \$5,000 or more per unit (including ancillary hardware items necessary to operate the equipment) and a useful life of more than one year.

1. Equipment to be Purchased: Include brand name, model, price of each unit. For automated data processing (ADP) equipment, include any added features, peripherals and ancillary items necessary to its operations, as well as PRICE of each piece of equipment.

Brand Name:
Model #:
Price:
% Paid by awarded grant funds:
% Paid by matching and/or agency funds:

2. Vendor Name and Address:

3. Procurement Process Used – Check One:

- a. Existing federal, state or local bid from established state or local government award list that meets or exceeds the federal guidelines.

Bid Type: Federal State Local Award Number: _____

- b. Competitive Procurement (ATTACH a description of the vendor selection process, the number of qualified vendors, the vendor selected and reason for selection.)
- c. Sole Source Procurement (ATTACH a sole source justification explaining each of the following circumstances that apply:)

• Item is available only from a single source	• Emergent need does not permit a delay that might result form a formal competitive solicitation
• After solicitation of a number of sources, competition was deemed inadequate	• Expertise of the vendor

4. Answer the following questions regarding this equipment purchase:

a. Is the equipment identified within the approved grant application and is it necessary and sufficient to meet the projects goals?	Yes	No
b. Is the equipment procurement in compliance with existing federal, state, and local laws and regulations?	Yes	No
c. Does the agency own any other equipment suitable for the project?	Yes	No
d. Was the purchase/lease comparison demonstrating that it is most advantageous to purchase rather than lease the equipment conducted?	Yes	No

REQUIRED SIGNATURE: I certify that the equipment requested is not available for the use of this project within my organization/agency. I understand that an Equipment Retention Form must be submitted to NCC at the end of the grant period. I, hereby, also certify that the content of this form, other than the data entry required, has not been altered.

Grant Primary Point of Contact Signature

Date

This request is: Approved Denied ***NCC Use Only***

Reason for Denial:

NCC Grant Manager Signature/Date

INSTRUCTIONS FOR COMPLETING EQUIPMENT PROCUREMENT CERTIFICATION FORM

Use this form to obtain required NCC prior approval for the procurement of equipment.

HEADING

Grantee/Subgrantee: This is the agency to which the grant award was made.

Grant Number: This is the grant number assigned to the project by NCC. It can be found on the Grant Award.

Project Title/Program Name: This is name of the project or program identified in the grant agreement.

Project Period: This is the period of the grant award, not the period for which this report is being submitted. It can be found on the Grant Award. Fill in the From date and the To date.

Prepared By: This is the person completing this form. Include this person's 10-digit phone number.

Date: This is the date this form is completed.

EQUIPMENT INFORMATION

1. Equipment to be Purchased: Include brand name, model, price of each unit. For automated data processing (ADP) equipment, include any added features, peripherals and ancillary items necessary to its operations, and price of each. Continue on attached plain paper if necessary. You can also attach the manufacturer's description.
2. Vendor Name and Address: This is the name and address of the vendor from which the equipment described in #1 is to be purchased. USE SEPARATE FORMS FOR EACH VENDOR/AWARD BEING MADE.
3. Procurement Process Used: Check the process used to select the Vendor indicated in #2. Refer to the NCC Grant Management Guide for additional information.
 - a. Indicate whether it was federal, state or local bid on the Bid type line. If from an existing bid, fill in the Award number line.
 - b. If the vendor was selected through a competitive process by written or phone quotes, attach a short narrative about the vendors contacted, price quote from each, the vendor selected and reason for selection.
 - c. If the vendor selected was determined to be the only source, a sole source justification must be attached that explains each of the following circumstances that apply:
 - Item is available only from a single source
 - Emergent need does not permit a delay that might result form a formal competitive solicitation
 - After solicitation of a number of sources, competition was deemed inadequate
 - Expertise of the vendor
4. Answer Yes or No to each of the questions regarding the purchase of this equipment.
5. Signature: The project Director should sign attesting that the equipment requested is necessary. One signed coy must be submitted to NCC.

Total Number of Referrals: This is the total number of referrals for the single program named in Program Name.

Number of Fees Charged: This is the number of times fees were charged during the period reported on this form.

Number of Fees Waived: This is the number of times fees were waived during the period reported on this form.

REMINDER: EQUIPMENT ITEMS PURCHASED MUST BE REPORTED ON NCC EQUIPMENT INVENTORY/RETENTION AT THE END OF THE GRANT PERIOD.

NCC will return the form, after review, indication whether the purchase is approved.