

Emergency Justification Form

Requisition #: FS-31

Date: 12/16/14

Amount: \$730.28

Department: Fire

Vendor: Advanced Communications

EMG: FY1415-033

This form has been designed to assist all San Miguel County employees in providing information necessary in the processing of an emergency requisition of products and/or services. Please complete and forward to the Finance Department along with your Purchase Requisition.

Departmental Responsibilities:

1. State the reason for the emergency purchase by explaining what the emergency is and/or what caused the emergency situation.

The emergency is due to a failure in dispatch communications. The system pages are not going through to the fire and emergency response services in the Ilfeld Pecos Area.

2. State the financial or operational damage/risk that will occur if needs are not satisfied immediately (do not simply say there will be a loss or some damage):

Financial risk is high but the risk to life and property is substantial. The situation is none compliant with the NFPA code 1201 that states a fire department must be toned to identify response within a specified time.

3. State why the needs were not or could not be anticipated so that goods/services could not have been purchased following standard procedures:

The needs could not be anticipated the fire departments receive tones and the system recently failed.

This is a technical issue that will need to be fully addressed.

4. State the reason and process used for selecting vendor (Attach all quotes/proposals received from other sources, if applicable):

The reason for selecting Advanced is due to the fact that we have a service agreement in SMC for servicing our 900 MHGS system and they installed the repeater system that is being used for dispatch by RECC. Also Advanced is currently the service provider for Santa Fe County and RECC>

I certify that the above statements are true and correct, and that no other material fact or consideration offered or given has influenced this recommendation for an emergency procurement.

Submitted by:

_____/s/_____
Elected Official/Department Supervisor

_____12/15/2014_____
Date

_____/s/_____
County Manager

_____12/16/2014_____
Date

FINANCE DEPARTMENT USE ONLY:

Approved By: _____/s/_____
Finance Department

Date: 12/18/2014