

Office of Purchasing 10910 Clarksville Pike, Ellicott City, Maryland 21042-6198 (410) 313-6744, fax (410) 313-6789

EMERGENCY PURCHASE AUTHORIZATION FORM

Statement

Emergency procurement of goods and services will be permitted only if the procurement is necessitated by an emergency, defined as any situation that threatens to jeopardize the health, welfare of students, employees, the HCPSS or the public, or the loss of an essential HCPSS service, including but not limited to interruption of the instructional program. Such emergency purchases will be made with as much competition as is practicable under the circumstances.

Date:			
School or Department:			
Contact:	Phone:	Email:	
Describe the Nature of the Emergen Date:	cy: Time:		
Select one of the following:			
Threat to terminate essent	ial services.		
Threat to Public/Student/S	Staff safety, health, and/or welfare		
How was competition conducted? (Discuss who was contacted and how	w many quotes were obtained and how the prov	vider was selected)
Vendor's Name:		Cost:	
Goods or Services Purchased:			
Signed:		Signed:	
Supervisor/Director Signa	uture	Chief Signature	
Purchasing Approval Approved Not Approved	Director of Purchasing Signature: _ Date: _		Issue 1-20