

SOLE SOURCE CERTIFICATION

VENDOR NAME:eCivis

COMMODITY: (General Description):License for a web-based Grant search and research tool. Provides unlimited sub-licenses for users authorized by the County

INITIAL ALL ENTRIES BELOW THAT APPLY TO THE PROPOSED PURCHASE. ATTACH ADDITIONAL DATA OR SUPPORT DOCUMENTATION IF NECESSARY (MORE THAN ONE ENTRY WILL APPLY TO MOST SOLE SOURCE PRODUCTS OR SERVICES).

SOLE SOURCE CERTIFICATION:

1. _____ PARTS/EQUIPMENT CAN ONLY BE OBTAINED FROM ORIGINAL MANUFACTURER - NOT AVAILABLE THROUGH DISTRIBUTORS. (ITEMS 3,4,5, OR 6 MUST ALSO BE COMPLETED)
2. _____ ONLY AUTHORIZED AREA DISTRIBUTOR OF THE ORIGINAL MANUFACTURER. (ITEMS 3,4,5, OR 6 MUST ALSO BE COMPLETED)
3. _____ PROPRIETARY ITEM/SERVICE (EXPLAIN BELOW)
4. _____ PARTS/EQUIPMENT NOT INTERCHANGEABLE WITH SIMILAR PARTS OF ANOTHER MANUFACTURER (EXPLAIN BELOW)
5. _____ THIS IS THE ONLY KNOWN ITEM/SOURCE THAT WILL MEET THE SPECIALIZED NEEDS OF THIS DEPARTMENT OR PERFORM THE INTENDED FUNCTION. (EXPLAIN BELOW)
6. _____ PARTS/EQUIPMENT ARE REQUIRED FROM THIS VENDOR TO PROVIDE STANDARDIZATION (EXPLAIN BELOW)
7. X NONE OF THE ABOVE APPLY. EXPLANATION FOR SOLE SOURCE REQUEST IS DETAILED BELOW:

COMMENTS/EXPLANATIONS :

Designating eCivis as a Sole Source will ensure uninterrupted operations and continuity for the current sub-licensee users of the system. Currently there are approximately 150 active users from Community Based Organizations and Alachua County Departments. There are additionally over 600 inactive, users who have not logged in for a period of 6 months, eCivis users. To maintain access to eCivis for the sub-licensees the master Licenses Agreement must be renewed. Seeking an alternate source and the subsequent implementation would hinder users from taking advantage of grant opportunities

SIGNED: _____
DEPARTMENT DIRECTOR

DEPT/DIV: _____

APPROVED: Sam M. App
PURCHASING MANAGER

DATE: 7-10-2019

APPROVED: [Signature]
ASSISTANT COUNTY MANAGER BUDGET & FISCAL SERVICES

DATE: 7-11-19

****PURCHASE OVER \$50,000**

APPROVED: _____
CHAIRMAN OF THE BOARD

DATE: _____