



Competitive Procurement Request

Project Title:			
Contact Information			
Agency/Institution:		Contact Person:	
Mailing Address:		Phone Number:	
		Email Address:	
MAGIC Customer #: (only required from state agencies)		Division/Dept:	
Project Summary			
Description of Project: (Include details of original acquisition if applicable)			
Additional Information: (if any)			
ITS Acquisition Approval (CP-1) should be effective through this date:			
Cost Estimates			
Fiscal Year	Initial Costs	Ongoing Costs	Time Constraints
FY			Item Needed by:
FY			Funds Expire:
FY			Total Estimated Project Cost:
FY			(enter below)
FY			
			Other Important Deadline(s): (e.g. current contract/CP-1 expiration dates)
			Estimate the Anticipated Lifecycle or Years of Product/System's Effective Use:
			Years
Funding Source:			
Discuss Funding: (e.g. fund number; how much of needed funding is definite; total project budget; any matching or other non-state funds)			
Acquisition Details			
Item or Part Number	Quantity	Description	Building Location(s)
Describe Platform and Infrastructure: Where does your agency plan to house or host the requested equipment or service? What resources currently available through ITS are needed (network connectivity, cloud computing/storage, colocation, business resiliency, etc.)? NOTE: For equipment or services outside of current ITS available contracts and resources, justification must be attached.			
Progress to Date: What has been done related to this project, including any communication with ITS staff?			
Vendors Contacted: List vendors and attach written estimates or other information received from vendors.			
Critical Factor(s): What was considered in the selection of a vendor, brand, or solution for this acquisition?			
MAGIC Vendor Code(s) - Vendor must be in MAGIC before a CP-1 can be issued.			
Place Order To	Vendor Name:	Remit To	Vendor Name:
Vendor Code:	Vendor Address:	Vendor Code:	Vendor Address:

By my signature, I acknowledge that ITS will conduct the procurement of the IT products or services indicated above with my agency's/institution's approval.

Name and Title (Agency Head/Public Institution CIO/Designee)

Signature

Date