



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: (enter below)	
FY				Estimate the Anticipated Lifecycle or Years of Product/System's Effective Use:
FY				
Funding Source: Click Here to Select				
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/Institution President/CIO)

Signature

Date