



TBU/ADMINISTRATION:

PRG REQUEST FORM

Submission Date:

Requested by:

Department:

Project Manager:

Procurement Officer:

Contract Title:

Contract Number:

Contract Type:

Project Budget/Engineer's Estimate: \$

Contract Term (years/months):

Type of Funding: State Federal Other

New Contract

Renewal Option

Modification

Total expenditures by Prime Contractor, to date if applicable: \$

MBE/DBE contract participation goal: \$

MBE/DBE participation to date; if applicable: %

Current SBR Designation if applicable:

VSBE contract participation goal: \$

VSBE participation to date; if applicable:

Requested Date:

(Check PRG Calendar for available dates.)

List All Subcontractable Opportunities/Work Items <i>(use second page, if necessary)</i>	Estimated Dollar Value of Each Opportunity/Work Item	NAICS, UNSPSC, NIGP and other Product/Commodity Codes <i>(If known)</i>

1. *Solicitation # _____ is designated for the SBR Program*

YES NO (If NO, proceed to Number 2 for determination of no SBR Program Designation)

SBR Program Designation removed. Solicitation amended to remove the SBR designation due to insufficient competition or other determination (justify below).

Date re-submitted to GOSBA for waiver (approval not required): _____

Amendment justification (add lines as needed):

2. *Solicitation # _____ is exempt or warrants a waiver of the SBR Program*

Designation mandate on the following basis:

Preference procurement made from a preference provider

Procurement involves federal dollars, inclusion in the SBR Program conflicts with federal law or grant provisions

- Sole Source*
- Proprietary Commodity Purchase*
- Noncompetitive negotiated procurements of human, social, or educational services*
- An eMMA search of small businesses registered to participate in the SBR Program as well as a search of other available small business resources and databases has yielded the identification of less than three (3) eligible small businesses [as defined in COMAR 21.01.02.01B(80)].*
Note: Use and submit the completed SBR Designation Worksheet (SBR PRG Form) below to show the product codes utilized and search results obtained for this waiver to apply.
- Other (Waiver Request Approval Required - see #4 for additional instructions)***
Waiver justification (add lines as needed):

Product Code	Description	# SBRs in eMMA Directory or other Database/Resources

3. Upon completion of this worksheet, send all SBR Program Designation Worksheets to the following GOSBA mailbox using the subject line below: SBRWaiver.GOSBA@maryland.gov

"Agency Name - Requisition # - SBR Program Designation Worksheet"

4. SBR Program Designation Waiver Requests identified as "Other" require review by the Governor's Office of Small, Minority & Women Business Affairs (GOSBA) prior to publishing the solicitation. Submit requests to the GOSBA mailbox identified above with the following subject line:

"Agency Name - Requisition # - SBR Program Designation Waiver Request"

GOSBA will respond to the SBR Program Designation Waiver Request within 72 hours with an approval or denial.

Special Notes:

Project Manager's Name:	Project Manager's Signature:	Date:
Procurement Officer's Name:	Procurement Officer's Signature:	Date:
D/MBE Liaison's Name:	D/MBE Liaison's Signature:	Date:
SBR Liaison Officer's Name:	SBR Liaison Officer's Signature:	Date:
PRG Chairperson's Name:	PRG Chairperson's Signature:	Date:
AAG's Name:	AAG's Signature:	Date: