PART 2953 - FORMS

Subpart 2953.1 - General

2953.100 Request for Recommendation by Procurement Review Board DL 1-490.

2953.101 Simplified Acquisition Documentation Checklist DL 1-2216.

2953.102 Quotation for Simplified Acquisitions DL 1-2078.

2953.103 Acquisition Screening and Review - over $100,000 DL 1-2004.

Subpart 2953.1 - General

2953.100 Request for Recommendation by Procurement Review Board DL 1-490.

The following form must be used by the requisitioning office to submit a request for review by the Procurement Review Board as specified in DOLAR 2901 and 2943. This form must be submitted through the Assistant Secretary for the program office to the Director, Division of Acquisition Management Services, for scheduling before the Procurement Review Board.

Request for Recommendation by Procurement Review Board

U.S. Department of Labor

INITIATING AGENCY: _____ POINT OF CONTACT: _____

INITIATING OFFICE: _____ TELEPHONE NUMBER: _____

1. Title, Purpose, Amount, Period of Performance

A. Title and purpose of contract, grant, or cooperative agreement: _____

B. Total dollar obligations attributable to this request: _____

C. Period of Performance requested for this action:
From: _____ To (including optional periods): _____

2. Type of Request/Authority

A. Type of Request (check all that apply)

- ☐ New Sole Source Contract or Contract Modification or Extension (FAR 6.302 and DLMS 2-836). Complete Item 5.
- ☐ New Sole Source Discretionary Grant or Cooperative Agreement (DLMS 2-836), or Modification or Extension of a Discretionary Grant or Cooperative Agreement (DLMS 2-836). Complete Item 5.
- ☐ Advisory and Assistance (A&A) Services (FAR 37.2). Complete Item 6.
- ☐ Ratification of an unauthorized commitment (FAR 1.602-3). Complete Item 7.
- ☐ Waiver to contract with a Current/Former Government Employee (individual or owner) (FAR 3.6 and DOLAR 2903.6). Attach Narrative.
- ☐ Application for use of Brand Name Specifications (FAR 6.302-1). Complete Item 5.
- ☐ Potential financial conflicts (DLMS 2-836(b)(2) and FAR 3.104-7(b)). Attach Narrative.

B. Authority. If this request involves a grant or cooperative agreement, provide the specific legal authority, including citation (e.g. Section # of the XXXX Act, # U.S.C. ####): _____

3. Information about Proposed Recipient of Contract, Grant, or Cooperative Agreement

A. Name: _____

B. Address: _____

C. Type of Organization: (circle all that apply)
Large Business / Small Business
Profit/ Nonprofit or Not-for-Profit / Foreign
Government / Educational Institution / Faith-Based or Community-Based
Other (describe) _____

D. To ensure that this organization is not currently suspended or debarred from federal programs, attach the results of a word search of the organization's name at http:/www.epls.gov/servlet/EPLSSearchMain/1.

E. (Enter City/State or Circle applicable area) Nationwide Foreign Region: NE SE MW NW SW
Area of Performance/Benefit: City: _____ State: _____

4. Other Contracts, Grants or Cooperative Agreements with Proposed Recipient

Provide the following information to the extent possible for each other contract, grant and/or other agreement active within the last year between the proposed organization and the Department of Labor using the following format. Additional references may be provided by attachment.

Title of Project: _____
Agency Served: _____ Period of Performance: _____
Contract/Grant/Agreement Number: _____ Total Life Cycle Cost to date: _____

☐ Additional references attached.

5. Sole Source Justification **[Skip If Not Applicable]**

☐ If this is a request for sole source contract, grant, or cooperative agreement authority, review the instructions and identify below the bases for a sole source award. Please attach a succinct narrative supporting each of the bases chosen to support the sole source selection. If you are claiming that the proposed recipient is the only responsible source or has unique qualifications, you must provide supporting information such as market research or other available information indicating whether there are other potential recipients and, if so, explain why you do not consider them acceptable. In addition, outline any steps that will be taken in the future to eliminate the need for sole source authority.

6. Advisory And Assistance Services (A&A) **[Skip If Not Applicable]**

A. Check one of the following: ☐ Sole Source A&A ☐ Competitive A&A value over $50,000

B. Subject to FAR 37.203, agencies may contract for advisory and assistance services, when essential to the agency's mission, to:

☐ (1) Obtain outside points of view to avoid too limited judgement on critical issues;
☐ (2) Obtain advice regarding developments in industry, university, or foundation research;
☐ (3) Obtain the opinions, special knowledge, or skills of noted experts;
☐ (4) Enhance the understanding of, and develop alternative solutions to, complex issues;
☐ (5) Support and improve the operation of organizations; or
☐ (6) Ensure the more efficient or effective operation of managerial or hardware systems.

Check the applicable box(es) above and attach written explanation.

7. Ratification Of Unauthorized Commitments **[Skip If Not Applicable]**

Ratifications of unauthorized commitments are authorized only under FAR 1.602-3 (c) which identifies seven limitations on use of the authority, and DOLAR 1.602-3, which outlines the DOL ratification procedures. Please review those requirements and attach to this form the required documents, including findings and a determination by the Agency Head that the statements are accurate, the Contracting Officer's determination that the price is fair and reasonable with a recommendation for payment, and legal counsel's (SOL/ETLS) determination that the ratification is legally supportable.

8. Conflict Of Interest Certification (Must Be Completed For Each Action):

I certify to the best of my knowledge and belief that statements provided herein are accurate and true, and I have no organizational, personal, financial or other conflicts of interest which could call into questions my objectivity in this matter or present a prohibited relationship under either 18 U.S.C. 208 or 5 C.F.R. § 2635.502.

Program Official (Contracting or Grant Officer's Technical Representative)

____ Otherwise, I have attached documentation to explain a possible relationship.

_____ _____
Signature Date

Agency Head

____ Otherwise, I have attached documentation to explain a possible relationship.

_____ _____
Signature Date

Note: Conflict of Interest statements apply to individuals and may be signed only by the individuals to whom they apply.

INSTRUCTIONS FOR COMPLETING THE DL 1-490

General Instructions: Agencies should consult DLMS 2-836, as well as the cited provisions of the Federal Acquisition Regulation (FAR) and Department of Labor Acquisition Regulation (DOLAR), as they prepare submissions to the PRB. Agencies also should ensure that their submissions are concise, but complete.

Item 1. Provide a one sentence title to describe the type of grant, contract, or cooperative agreement, and a short description of the purpose of the requested action. The total dollar threshold should include proposed optional periods of performance and additional services.

Item 2. FAR references may be found at http://www.arnet.gov/far/loadmainre.html; the Department of Labor Acquisition Regulation (DOLAR) may be found at http://www.dol.gov/dol/allcfr/Title_48/Chapter_29.htm; and all other references may be found at:http://www.labornet.dol.gov/DCS_FileSystem/DLMS2Administration/dlms2_0800.doc. If the proposed action is a grant or cooperative agreement, please provide the specific legal authority, including citation (e.g. Section ____ of the ___ Act, ___ U.S.C. ___), for the grant or cooperative agreement. You also may wish to consult the division of the Office of the Solicitor that serves your agency.

Item 3. The company or organization (including sub-organization) should be identified.

Item 4. The OASAM/Business Operations Center/Office of Acquisition and Management Services/Division of Acquisition Management Services may be able to assist you in this effort.

Item 5. Sole source justifications are summarized below. *Please note, however, that authorizing program statutes or appropriation laws sometimes include specific provisions restricting non-competitive actions. In those cases, the statutory authority supercedes the authority outlined below and the statutory authority should be cited in your response to Item 5.*

Contract Authority:

- FAR 6.302-1 Sole Source and no other supplies or services will satisfy agency requirements
  (i) unsolicited proposal
  (ii) follow on to competed action for a major system.
  (iii) rights in data, patent rights, copyrights or secret processes make supplies available from only one source.
- FAR 6.302-2 Unusual and compelling urgency.
- FAR 6.302-3 Industrial mobilization; engineering, developmental, or research capability; or expert services for dispute resolution.
- FAR 6.302-4 International agreement.
- FAR 6.302-5 Authorized or required by statute.
- FAR 6.302-6 National security
- FAR 6.302-7 Public interest (requires Secretarial and Congressional approval)

Grant Authority: DLMS 2, Chapter 800, Section 836(g):

(1) A non-competitive award is authorized or required by the statute funding the program.
(2) The activity to be funded is essential to the satisfactory completion of an activity presently funded by DOL, wherein competition would result in significant or real: harm (further harm) to the public good; expenses in excess of any potential savings to the Government; disruption to program services; duplication of work at additional cost to the Government; or delay in the time of program completion.
(3) Services are available from only one responsible source and no substitute will suffice; or the recipient has unique qualifications to perform the type of activity to be funded.
(4) The recipient has submitted an unsolicited proposal that is unique or innovative and has outstanding merit.
(5) The activity will be conducted by an organization using it's own resources or those donated or provided by third parties, and DOL support of the activity would be highly cost effective.
(6) It is necessary to fund a recipient that has an established relationship with the agency in order to: (A) Maintain an existing facility or capability to furnish services or benefits of particular significance to the agency on a long term basis; or (B) Maintain a capability for investigative, scientific, technical, economic, or sociological research.
(7) The application for the activity was evaluated under the criteria of the competition for which the application was submitted, was rated high enough to have deserved selection under that competition, and was not selected for funding because the application was mishandled by the Department.
(8) The Secretary has determined that a noncompetitive award is in the public interest. This authority may not be delegated.

Item 6. Advisory and Assistance Services are defined in FAR 2.101 and the policy is detailed in FAR Part 37.2.

Item 7. Ratification, as used in this subsection, means the act of approving an unauthorized commitment, by an official who has the authority to do so. The attached document should include: a brief description of what was acquired without authority; any mitigating statements; and a findings and determination by the Agency head that the statements are accurate, including a Contracting Officer's determination that the price is fair and reasonable, with a recommendation for payment and the concurrence of legal counsel (SOL/ETLS) with that determination.

Item 8. Conflict of Interest Certifications are necessary with each DL 1-490 submitted to the PRB. Approval may not be granted without proper signature. Conflict of Interest certifications are personal to the individual signing and may not be signed or delegated by one person on behalf of another.

NOTE: The Procurement Review Board reviews these requests and makes a recommendation to approve/disapprove to the Assistant Secretary for Administration and Management based on the merits of the case provided in the request.

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☐ If this is a request for sole source contract, grant, or cooperative agreement authority, review the instructions and identify below the bases for a sole source award. Please attach a succinct narrative supporting each of the bases chosen to support the sole source selection. If you are claiming that the proposed recipient is the only responsible source or has unique qualifications, you must provide supporting information such as market research or other available information indicating whether there are other potential recipients and, if so, explain why you do not consider them acceptable. In addition, outline any steps that will be taken in the future to eliminate the need for sole source authority.

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NOTE: The Procurement Review Board reviews these requests and makes a recommendation to approve/disapprove to the Assistant Secretary for Administration and Management based on the merits of the case provided in the request.

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NOTE: The Procurement Review Board reviews these requests and makes a recommendation to approve/disapprove to the Assistant Secretary for Administration and Management based on the merits of the case provided in the request.

2953.101 Simplified Acquisition Documentation Checklist DL 1-2216.

The following checklist must be used to document all simplified acquisitions at or below the simplified acquisition threshold.

Simplified Acquisition Documentation Checklist

U.S. Department of Labor

PART I: CHECKLIST - Complete Section A for purchases less than $2,500, or Sections A and B for purchases between $2,500 and $100,000

SECTION A. Micro-purchases - Less than $2,500 (not set aside for small business only; no competition required if price is determined reasonable)

(✓ or blank for N/A)

- ☐ Sufficient funds are available to cover this purchase, and the price reflected on this order is considered fair and reasonable.
- ☐ All Quotation information is properly documented, and applicable/required clearances and/or approvals have been obtained are included in this file
- ☐ See www.jwod.com and **www.unicor.gov.** Required sources of supplies/services, including excess supplies, were reviewed prior to the selection of this vendor (n/a for delivery orders against existing contracts)
- ☐ The vendor does not appear on the List of Parties Excluded from Federal Procurement Programs. Reference http://epls.arnet.gov/
- ☐ This order **does not** represent an unauthorized commitment of funds requiring ratification under FAR 1.602-3 (otherwise attach documentation)

SECTION B. Purchase Between $2,501 and $100,000 (set aside for small business, competition is required for open market orders, schedule comparison is required for GSA/FSS orders)

(✓ or blank for N/A)

- ☐ The order was best value among two or more solicited open market vendors. **Use Form DL 1-2078, if not, complete Parts II and III below.**
- ☐ The requirement was set aside for small business participation only. **If not, complete Part IV below.**
- ☐ The procurement is for Information Technology products or software and has been reviewed for compliance with Section 508 and SmartBuy licenses.
- ☐ The item complies with http://www.eere.energy.gov/femp/procurement/ policies on recycling, and Energy star compliance.
- ☐ If this is a Delivery Order against a GSA/Federal Supply Schedule, at least 3 vendors schedules were reviewed prior to issuing orders.
- ☐ Written Solicitation between $10,000 - $25,000 was displayed in a public place, open market requirements over $25,000 were synopsized.
- ☐ **Service Contract Act.** This is an Open Market Purchase: ☐ primarily a product, ☐ exempt per 29 CFR 541, ☐ Davis-Bacon applicable, or ☐ SCA WD included ☐ (SF98 & 98a issued)

PART II: PRICING MEMORANDUM - Price reasonableness is based on (✓ all that apply)

- ☐ Commercial Catalog Pricing/Published Advertisement (Source Date: _____ Page Number)
- ☐ Market Research or established market prices.
- ☐ Comparison to prior purchase of same or similar item Vendor: _____ Purchase Order No: _____ Date of Order _____ Unit Price:
- ☐ Best Value analysis recommended by Technical Personnel (Specify) _____ (continue on back)
- ☐ Other (i.e. contracting officer knowledge, comparison to independent government estimate) _____

PART III: SOLE SOURCE DOCUMENTATION - Only one source was solicited for the following reason(s) (✓ all that apply)

- ☐ The item is sole source in nature, i.e. copyright/patient, proprietary software/hardware, or original equipment manufacturer, and not available from any other source.
- ☐ Urgent and Compelling - state nature of emergency and reason no competition was obtained (lack of planning is not sufficient reason)

PART IV: LARGE BUSINESS DOCUMENTATION - The requirement is not awarded to a small business because (✓ all that apply)

- ☐ No small businesses were located that can provide the required goods/services
- ☐ No quotes were received from small businesses
- ☐ Quotes received from small businesses were not the lowest prices or the best value (considering quality, delivery, quantity, past performances, etc)

DOCUMENTATION DISTRIBUTION DATE: ☐ Vendor ☐ Finance ☐ Accounting ☐ Requestor ☐ File

ORDER PROCESSED BY: Contract Specialist: _____ (Signature Date)

CONCUR: Contracting Officer: _____ (Signature Date)

DL 1-2216
(10/03)

2953.102 Quotation for Simplified Acquisitions DL 1-2078.

The following form must be used to document all simplified acquisitions above the micro-purchase threshold and below the simplified acquisition threshold. This form may also be used to document commercial acquisitions on a fixed price basis up to $5 million.

Quotation for Simplified Acquisitions
($2,500-$100,000)

U.S. Department of Labor
Acquisition Management Services

1. Effective Date	2. Order Number	3. Quotes	Oral	Written
			☐	☐

4. Vendor Solicited

	Telephone Number	Date of Quote	Delivery Offer	FOB Point
Vendor 1. Company Name: Point of Contact: City, State, Telephone: Business Type Person Contacted:				
Vendor 2. Company Name: Point of Contact: City, State, Telephone: Business Type Person Contacted:				
Vendor 3. Company Name: Point of Contact: City, State, Telephone: Business Type Person Contacted:				

Quantity	Description of Product or Service	Vendor 1. Unit Price	Total Amount	Vendor 2. Unit Price	Total Amount	Vendor 3. Unit Price	Total Amount
		Total Amount		Total Amount		Total Amount	

5. Basis for Price Reasonableness

Low Cost or Best Value Based on (Specify)

6. Other Factors Affecting Source (FSS, Etc.)

(Specify)

DL 1-2078
(10/03)

2953.103 Acquisition Screening and Review - over $100,000 DL 1-2004.

The requiring organization must complete the following form for all acquisitions above the *simplified acquisition threshold*. This form will then be submitted through the contracting officer to the Office of Small Business Programs for review.

Acquisition Screening and Review - over $100,000

U.S. Department of Labor

A. Originating Agency

1. Purchasing Office
Name:
Street Address:
City: State: Zip:
Phone Number:

2. Date of Purchase Request:

3. Estimated Dollar Value
This FY:_____
Total Contract Value:_____

4. Period of Performance (Include Option Years):

5. Description of Product or Service:

6. Recommended Method of Procurement (Select a method from block 11 below):

7. Signature of Small Business Specialist: Date:

B. Contracting Office

8. Solicitation Number:

9. Estimated Date of Release:

10. Estimated Date of Response/Opening:

11. Check all applicable boxes:

Proposed Method of Procurement
- ☐ GSA - Multiple Award Schedule order
- ☐ Multi-agency contract order
- ☐ Govt-wide acquisition contract order
- ☐ Open Market Buy - Select *one* of the following:
  - ☐ 8(a)/HUBZone sole source (I.D. Proposed Contractor)
  - ☐ HUBZone sole source
  - ☐ 8(a) sole source
  - ☐ HUBZone competition
  - ☐ 8(a) competition
  - ☐ 100% Small Business Set-Aside
  - ☐ Partial Small Business Set-Aside
  - ☐ Unrestricted - Insufficient Small Business (attach justification, proposed subcontracting amounts and evaluation preference for SDB's)

12. NAICS Code and Small Business Size Standard:

13. Proposed Synopsis:
- ☐ Yes
- ☐ No. Per FAR 5.202
- ☐ FEDBIZOPPS
- ☐ Other _____

14. Proposed Issuing Number of Solicitations to:

No.
- ____8(a)
- ____HUBZone
- ____Small Disadvantaged Business (SDB)
- ____Women-Owned Small Business (WOSB)
- ____Service Disabled Veterans-Owned Small Business (SDVOSD)
- ____Veteran-Owned Small Business (VOSB)
- ____Small Business (SB)
- ____Large Business (LB)

15. Is this a bundled procurement? ☐ Yes ☐ No
(If yes - attach supporting documentation/justification)

Procurement History

16. Has Exact Item/Service Been Previously Awarded?
- ☐ Yes (Complete the rest of the section)
- ☐ No

17. Period of Performance:

18. Contract Number:

19. SIC/NAICS Code and Small Business Size Standard:

20. Name, Address and business type of Contractor

_____ ☐ HUBZone
_____ ☐ 8(a)
_____ ☐ SDB
_____ ☐ WOSB
_____ ☐ SDVOSB
_____ ☐ VOSB
_____ ☐ SB
_____ ☐ LB

21. Total Value:

22. Method of Procurement:

23. No. of Responses Received
- _____8(a)
- _____HUBZone
- _____Small Disadvantaged Business (SDB)
- _____Woman-Owned Small Business (WOSB)
- _____Service Disabled Veteans-Owned Small Business (SDVOSB)
- _____Veteran-Owned Small Business (VOSB)
- _____Small Business (SM)
- _____Large Business (LB)

24. Signature of Contracting Officer: Date:

C. Office of Small Business Programs - OSDBU/Small Business Administration Procurement Center Representative

25.
- ☐ I concur with the recommendations.
- ☐ I recommend soliciting additional sources including those on the attached list.
- ☐ I do not concur with the recommendations and request suspension of the procurement action pending an appeal under FAR 19.505.S B A Form 70 is attached.

26. Signature of OSDBU/SBA Procurement Center Representative: Date: