

**DEPARTMENT OF ADMINISTRATION**

**515 East Musser Street, Suite 300 │Carson City, Nevada 89701**

**Phone: 775-684-0170 │ Fax: 775-684-0188**

**STATE OF NEVADA**

***Purchasing Division***

**CONTRACT EXTENSION JUSTIFICATION AND**

**REQUEST FORM INFORMATION**

The State Administrative Manual (SAM) is a compilation of policy statements concerning the internal operations of State government. Policies are based on statute or other approved regulations and is published for use as a guide in conducting the State’s business. The Purchasing Division is the authority for the State’s procurement processes and makes recommendation for policy to the State Board of Examiners (BOE); it is the BOE’s discretion as to whether a deviation to that policy may be approved. It is the BOE’s current policy that contracts be re-solicited every four (4) years; an agency requesting to extend a contract beyond the policy period must request and receive approval from the Purchasing Administrator, prior to submitting their contract to the Department of Administration’s Budget Office, and ultimately the BOE.

The review process is generally completed within fifteen (15) working days. Agencies must provide compelling justification as to why it is in the State’s best interest to extend a current contract beyond the BOE’s policy period. Full disclosure is required of any previous contractual relationships with the contractor, as well as the circumstances which lead to the contractual relationship.

1) Contracts that were entered into via a solicitation process for which the agency is requesting to extend the contract beyond the re-solicitation policy period, the agency must submit a Contract Extension Justification and Request Form to the Purchasing Division.

2) Contracts that were entered into via the solicitation waiver process for which the agency is requesting to extend the contract beyond the re-solicitation policy period, the agency must submit a Contract Extension Justification and Request Form to the Purchasing Division.

3) If the agency is requesting authority to extend an unsolicited contract beyond the policy period, a Contract Extension Justification Form must also be submitted for consideration to the Purchasing Division.

Per SAM 0325, it is the policy of the State of Nevada to limit and monitor costs associated with the hiring of professional and expert services. All such professional service contracts may not be extended beyond a two (2) year term without review and approval of the Board of Examiners.

***PLEASE BE ADVISED: A waiver approval exempts an agency from the solicitation process at the time of the approval only and for the timeframe identified in Section #6, Proposed Amendment Information. It does not exempt an agency from any other contracting process. Additionally, if your waiver request contains an IT component exceeding $50,000, a TIN/CIN approval or approval update memo must accompany your submission. Requests received without the required approval will be returned to the agency***.

Prior to submitting the form, if you have any questions, please contact Cindy Stoeffler at 775-684-0173 or via email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).



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|  |  |
| --- | --- |
| ***Purchasing Use Only:*** | |
| ***Approval #:*** |  |

**CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM**

***All fields are required - Incomplete requests will be returned to the agency***

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| **1** | **Agency Contact Information: Note: Approved copy will be sent to only to the contact(s) listed below:** | | |
| ***STATE AGENCY NAME REQUIRED:*** |  | |
| ***Contact Name and Title*** | ***Phone Number*** | ***Email Address*** | |
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| **2** | **Contractor Information:** | |
| Contractor Name: |  |
| Contact Name: |  |
| Complete Address:  City, State and Zip Code |  |
| Phone Number: |  |
| Email Address: |  |

|  |  |  |  |  |  |  |  |  |
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| **3** | **List *all previous* Contract Information for which the agency has contracted with this vendor (contract history):** | | | | | | | |
| Solicitation Type, if applicable: | |  | | | | #: |  |
| Enter CETS Number: | ***#*** | | | | | | |
| Contract Amount: | ***$*** | | | | | | |
| Contract Term: | Start Date: | |  | End Date: |  | | |

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| ***Purchasing Use Only:*** | |
| ***Approval #:*** |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **4** | **Current Contract Information:** | | | | | | |
| Solicitation Type, if applicable: | |  | | | #: |  |
| Enter CETS Number: | ***#*** | | | | | |
| Initial Contract Amount: | ***$*** | | | | | |
| Contract Term: | Start Date: | |  | End Date: |  | |

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| --- | --- | --- | --- | --- |
| **5** | **Amendment Information – List *all previously* approved amendments:** | | | |
| *Amd #:* | *Brief Synopsis of What*  *Amendment Accomplished:* | *Dollar Change in*  *Contract Amount* | *Change in End Date* |
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| **6** | ***Proposed* Amendment Information:** | | | |
| *Amd #:* | *Brief Synopsis of What the Requested Amendment will Accomplish* | *Dollar Change in*  *Contract Amount* | *Change in End Date* |
|  |  |  |  |

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| **7** | **What is the justification to extend the contract term beyond the State’s four (4) year re-solicitation policy (SAM 0338)?** |
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| **8** | **What are the potential consequences to the State if the contract extension request is denied?** |
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| ***Purchasing Use Only:*** | |
| ***Approval #:*** |  |

By signing below, I know and understand the proposed contract extension exceeds the State’s policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

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| --- | --- | --- | --- |
|  |  |  |  |
| Signature of Agency Representative Initiating Request |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Print Name of Agency Representative Initiating Request |  |  | Date |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Signature of Agency Head Authorizing Request |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Print Name of Agency Head Authorizing Request |  |  | Date |

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

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| ***NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.*** |  |

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| Signed: |  |  |  |
| Administrator, Purchasing Division or Designee |  |  | Date |