



**STATE OF NEVADA  
DEPARTMENT OF ADMINISTRATION**

*Purchasing Division*

515 East Musser Street, Suite 300 | Carson City, Nevada 89701  
Phone: 775-684-0170 | Fax: 775-684-0188

<b>Purchasing Use Only:</b>	
Approval#:	230103 @

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

**ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY**

<b>1a</b>	<b>Agency Contact Information - Note:</b> Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	<b>STATE AGENCY NAME REQUIRED:</b>	<i>Governor's Office of Economic Development (GOED)</i>	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Michele Lynn, Director of Administration</i>	<i>775-687-9910</i>	<i>mlynn@goed.nv.gov</i>

<b>1b</b>	<b>Vendor Information:</b>	
	Vendor Name:	<i>National Main Street Center (Center)</i>
	Contact Name:	<i>Lisa Thompson</i>
	<b>Complete Address:</b> City, State, and Zip Code	<i>53 W. Jackson Blvd., Suite 350, Chicago, IL 60604</i>
	Telephone Number:	<i>872-264-5484</i>
Email Address:	<i>lthompson@savingplaces.org</i>	

<b>1c</b>	<b>Type of Waiver Requested – Check the appropriate type:</b>	
	Sole or Single Source:	<input checked="" type="checkbox"/>
	Professional Service Exemption:	<input type="checkbox"/>

<b>1d</b>	<b>Contract Information:</b>			
	Is this a new Contract? Check One:	Yes:	<input checked="" type="checkbox"/>	No:
	<b>If 'No' Enter Amendment Number:</b>			
	<b>Enter CETS Number:</b>	<i>TBD</i>		

<b>1e</b>	<b>Term: 4 years</b>			
	One (1) Time Purchase? Check One:	Yes:	<input type="checkbox"/>	No:
	Contract:	Start Date:	<i>Upon Approval</i>	End Date:
			<i>9/15/2027</i>	

<b>1f</b>	<b>Funding:</b>	
	State Appropriated:	<i>BA 1532</i>

Purchasing Use Only:	
Approval #:	230103 (C)

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$ 280,536

2	Provide a description of work/services to be performed or services with goods to be purchased:
	<i>The Center will provide orientations, trainings, application workshops, inaugural visits, and other assistance related to the Nevada Main Street Program, created by the 2017 Legislature (per AB417) and in connection with the National Trust for Historic Preservation.</i>

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?
	<i>The Center is the only provider for this program and is part of the National Main Street Center, Inc., a subsidiary of the National Trust for Historic Preservation. The National Trust for Historic Preservation is a nonprofit that came out of the National Park Service. The National Park Service administers the National Register of Historic Places, grant programs, and the federal rehabilitation tax incentives. It is a bureau within the Department of the Interior. The National Main Street Center was established as a program of the National Trust for Historic Preservation in 1980 as a way to address the myriad issues facing older and historic downtowns during that time. An exciting new chapter for the organization began on July 1, 2013, when the National Main Street Center launched as an independent subsidiary of the National Trust. AB417 (2017) references that this entity will be utilized to carry out the Nevada Main Street Program.</i>

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>See Above</i>

5	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
			X
	a. <i>If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>		
	b. <i>If not, why were alternatives not evaluated?</i>	<i>The National Main Street Center is the only provider of comprehensive technical assistance through integral support to Coordinating Programs at the city, county, and state level, and leadership and direction from the National Main Street Center (NMSC).</i>	

Purchasing Use Only:	
Approval #:	2301030

	Has the agency purchased these services/services with goods in the past? Check One:					Yes	No
	<b>NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u></b>					X	
6	a. <i>If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u></i>						
	<b>Term</b>		<b>Value</b>	<b>Short Description</b>	<b>Provide Type of Procurement RFP#, RFQ#, Waiver #</b>	<b>CETS #</b>	
	<b>Start Date</b>	<b>End Date</b>					
	8/25/2017	6/30/2021	\$160,498	Program Facilitation	Waver #170801	19080	
	8/10/2021	9/15/2022	\$50,200	Program Facilitation	Waiver #210603	24587	
			\$				
			\$				
		\$					

7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
	<i>If this waiver is denied, the Nevada Main Street program would be unable to provide services to 24 communities currently active in the state coordinating program.</i>

8	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?
	<i>GOED has reviewed the budget and pricing and determined that the costs are fair and reasonable.</i>

	Will this purchase obligate the State to this vendor for future purchases? Check One:		Yes	No
	<b>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</b>		X	
9	a. <i>If yes, please provide details regarding future obligations or needs.</i>			
	<i>GOED plans to extend this contract thru a four year term.</i>			

<i>Purchasing Use Only:</i>	
Approval #:	230103②

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification 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.

*Shari Davis*  
 \_\_\_\_\_  
 Signature of Agency Representative Initiating Request

Shari Davis, Director, Rural Economic & Community Development  
 \_\_\_\_\_  
 Print Name of Agency Representative Initiating Request

Jan 9, 2023  
 \_\_\_\_\_  
 Date

*Michele Lynn*  
 \_\_\_\_\_  
 Signature of Agency Head Authorizing Request

Michele Lynn, Director of Administration-GOED  
 \_\_\_\_\_  
 Print Name of Agency Head Authorizing Request

1.9.2023  
 \_\_\_\_\_  
 Date

**FOR PURCHASING USE ONLY – PLEASE NOTE:** *In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.*

\_\_\_\_\_  
 Name of agency or entity who provided information or review:

\_\_\_\_\_  
 Representative Providing Review

\_\_\_\_\_  
 Print Name of Representative Providing Review

\_\_\_\_\_  
 Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

<b>NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.</b>	<input type="checkbox"/>
---	--------------------------

Approved by:

*Kevin D. Dwyer*  
 \_\_\_\_\_  
 Administrator, Purchasing Division or Designee

1/24/23  
 \_\_\_\_\_  
 Date