**BID WAIVER AUTHORIZATION FORM INSTRUCTIONS**

This form will be used to request bid waivers, please note, a department head signature is now required.

* This form is in MS Word template format.
* All **Gray**fields must be filled out.
* Once saved, forward all waivers to:  purchasing@meridenct.gov

If you come across any issues or have any questions, please call  (203) 630-4115.

**BID WAIVER AUTHORIZATION FORM**

REQUESTING DEPARTMENT:Choose an item. DATE**: 3/21/2017**

**REQUIRED SIGNATURES** Purchasing Office use only

□ DEPARTMENT HEAD □ PURCHASING OFFICER □ FINANCE DIRECTOR □ CITY MANAGER

NAME , TITLE, is requesting a bid waiver on behalf of DEPARTMENT to purchase ITEM DESCRIPTION from SELLER for a total of PRICE. REASON.

Therefore, NAME, TITLE, is requesting a bid waiver for a total of PRICE from SELLER.

Requested by:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Department Head/Designee

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Wilma C. Petro, CPPB, C.P.M., Purchasing Officer

I agree with your reasons for the waiving of the provisions of Chapter VIII, Section I, Article C of the Charter of the City of Meriden, and I hereby consent to the waiving of Chapter VIII, Section I, Article C of the Charter of the City of Meriden for the purpose of executing the project in the manner stated above.

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Approved by: Michael Lupkas

 Finance Director

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 Guy Scaife

 City Manager