

Request for Limited Delegated Purchase Authorization (DPA) Division of Purchasing (DOP)

E-mail Completed Request Form to: DOP at purchasing@adm.idaho.gov

Agency Purchasing Representative (name):	
E-mail/Phone:	
Name of Agency:	
Request for the Purchase of:	
Requested Supplier (vendor name):	
Cost Estimate (attach invoice/quote):	

IDAPA 38.05.01.021 provides that the division shall administer the acquisition of all property for agencies except those for which the agencies have separate statutory purchasing authority. The administrator may delegate in writing such authority as deemed appropriate to any employees of the division or of a purchasing activity...(a) All delegations must be given in writing prior to the acquisition of the property. All delegated acquisitions must be made according to these purchasing rules.

Background and Justification (attach additional sheets as needed):

Agency Certification: *The information provided above is true and accurate to the best of my knowledge, and supports my request for a one-time, limited delegation of authority to complete the identified purchase:*

Agency Representative (signature): _____ Date: _____

THE AUTHORITY GRANTED IN THIS DPA IS LIMITED TO THE AGENCY'S SPECIFIC REQUEST AS DETAILED ABOVE, IS GRANTED TO THE INDIVIDUAL NAMED ABOVE, AND MAY INCLUDE ADDITIONAL CONDITIONS. THIS IS A ONE-TIME AUTHORIZATION.

Approved

Additional conditions apply to this approval.

Rejected

DOP Signature: _____

DOP Printed Name/Title: _____

Date: _____