



Procurement Emergency Notification

ROUTING
PRSM, MSC 3890
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Phone 646-2916
Fax 646-1351

Please attach vendor quote/proposal.

SECTION 1: REQUESTOR INFORMATION

Requestor Name: _____

Department: _____ Phone: _____

SECTION 2: REQUEST DETAILS

Supplier: _____ Dollar Amount: \$ _____

Supplier Address: _____

List services, construction or items of tangible personal property procured: _____

What circumstance(s) describe(s) the reasoning for this emergency purchase, thus eliminating competition? *Please check applicable blocks.*

- Function of Government (Explain below)
- Preservation or protection of property (Explain below)
- The health or safety of any person (Explain below.)

Explanation:

SECTION 3: APPROVALS

Requestor:

Printed Name: _____ Signature: _____ Date: _____

Procurement Services: This procurement and the contractor selection meets the requirements of 13-1-127 NMSA 1978 as an emergency and the contractor selection is appropriate under the statutory requirements.

Printed Name: _____ Signature: _____ Date: _____

Reset