leasing WAIVER request for alternate procurement

unanticipated amendment exception (UAE)

Complete all required fields below and email in **Word** format to Department of Transportation & Public Facilities, Division of Facilities Services, Leasing

WAIVER NUMBER: Click or tap here to enter text.

DEPARTMENT: Choose an item.

WAIVER TYPE: **Unanticipated Amendment Exception**

DATE: Click or tap here to enter text.

TOTAL ESTIMATED COST: Click or tap here to enter text.

LESSOR NAME: Click or tap here to enter text.

# EXECUTIVE SUMMARY

Provide a description of the leased space scope of work, and the specific reasons why this amendment is in the state’s best interest:

Click or tap here to enter text.

# preparer information

Alternate procurements must be completed by procurement staff with Department of Administration, Office of Procurement & Property Management procurement certification appropriate for the dollar amount.

**Preparer Name:** Click or tap here to enter text.

**Preparer Email:** Click or tap here to enter text.

# lease contract and amendment history

The following table provides a summary of this lease contract including this requested amendment:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contract Action** | **Description of Action** | **Term** | **RAP or amendment TERM Amount** | **TOTAL CONTRACT AMOUNT** |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

**Note:** To date, $X has been added to this contract via the unanticipated amendment process. Approval of this request will result in an approximate X% increase to the current contract **term** value of $X.

OR

**Note:**To date, no additional costs have been added to this contract via the unanticipated amendment process. Approval of this request will result in an approximate X% increase to the current contract **term** value of $X.

# justification

Please complete the fields below. For Legitimacy and Scope, you must attach documentation from the project manager or another relevant subject matter expert that verifies the information being provided is true and accurate.

##### **legitimacy**

Provide an explanation of whether this amendment is legitimate and due to unforeseen circumstances, which occurred as work progressed, and whether the reasons for the amendment were unforeseen when contract was established:

Click or tap here to enter text.

##### **scope**

Provide an explanation of whether this amendment is within the scope of the original contract.

Click or tap here to enter text.

##### **contract clause**

Please provide an explanation of how the original contract contain clauses authorizing modification.

Click or tap here to enter text.

##### **extent**

Please provide an explanation to clarify if the amendment contains an important general change that alters the main purpose of the contract, if it is of such importance as to constitute a new undertaking, or if it does not contain any changes to the main purpose.

Click or tap here to enter text.

# contracting officer recommendation

**Recommended by:** Choose an item.

**Recommended Action:** Choose an item.

# statewide leasing & facilities manager recommendation

**Recommended by:** Choose an item.

**Recommended Action:** Choose an item.

# delegated authority

If this request is approved, the procurement must be made under these conditions:

This authority is limited to the goods and services and vendor(s) specified in this WAIVER and is not to exceed the TOTAL ESTIMATED COST.

Prior to amending the contract, cost and pricing data must be obtained from the vendor per AS 36.30.400.

Once the contract is amended, the agency’s normal authority to process unanticipated amendments under 2 AAC 12.485 apply unless specified otherwise in the SPECIFIC DELEGATION AUTHORITY / RESTRICTIONS / NOTES section below.

# specific delegation authority / restrictions / notes

Click or tap here to enter text.

# dot&pf chief contracts officer concurrence

**Reviewed by:** Choose an item.

**Recommended Action:** Choose an item.

# DOT&PF Commissioner APPROVAL

By signature below, I concur with the DFS LEASING CONTRACTING OFFICER RECOMMENDATION and any SPECIFIC DELEGATION AUTHORITY / RESTRICTIONS / NOTES entered related to this request.

**Signature:** **Date:**

|  |  |
| --- | --- |
|  |  |