

## Notice of Forthcoming Procurement (NFP) Form

<b>Department of General Services</b>	
<b>Notice of Forthcoming Procurements</b>	
This form is to be submitted at the beginning of the process, for <u>all procurements</u> which will exceed the dollar thresholds as established in The Procurement Handbook, Part I, Chapter 7- Thresholds and Delegations.	
<input checked="" type="radio"/> New Form <input type="radio"/> Edit Form	Status: Reserved

### REQUESTING AGENCY INFORMATION

Complete all fields in this section.

Requesting Agency Information	
Date:	6/29/2016
Agency:	Administration <span style="float: right;">▼</span>
Bureau:	
Agency Contact Person:	
Contact Phone #:	<small>Format</small>
Contact Email:	
Confirm Email:	
Project Manager:	
Project Title:	

Will receive an error message if e-mails do not match

Enter descriptive title

Select if *Material*, *Service* or *IT* and enter description of project. Upload Statement of Work if available.

Description of Project*	<input type="radio"/> Material <input type="radio"/> Service <input type="radio"/> IT <small>* For IT-Services and IT Materials, please choose IT</small> <div style="border: 1px solid #ccc; height: 40px; margin-top: 5px;"></div>
Attach Project Charter or SOW (if available) and BOP 124	<small>Documents naming conventions should not contain special characters (i.e. ~, (), &amp;, etc).</small> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 5px;">Browse...</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 5px;">Attach File</div> <div style="border: 1px solid #ccc; height: 30px; margin-bottom: 5px;"></div> <div style="display: flex; justify-content: space-between;"><span>View</span><span>Remove</span></div>

When applicable, attach BOP 124 and/or SOW

If IFB is not your Anticipated Method of Procurement (see following screen shot), you **must** upload the BOP-124 Determination to Use Competitive Sealed Proposals (RFP) Method of Procurement.

## ANTICIPATED CONTRACT DETAILS

Complete the following information in this section.

Anticipated Contract Details	
Anticipated Solicitation Posting Date	<input type="text"/>
Anticipated Term of Contract/Renewals:	Contract Term: <input type="text"/> year(s) <input type="text"/> months Number of Renewals: <input type="text"/> ea <input type="text"/> year(s) (Enter decimal for months, if less than a year enter 0.X where X is the partial amount)
Anticipated Method of Procurement:*	<input type="radio"/> IFB <input type="radio"/> IGA <input type="radio"/> ITQ <input type="radio"/> PA <input type="radio"/> RFP <input type="radio"/> RFQ
Does this procurement fall within the carve-out list for UniqueSource?	<input type="radio"/> Yes <input type="radio"/> No If yes, or if you believe this may be a potential opportunity for UniqueSource, please contact the DGS Program Manager at <a href="mailto:RA-uniqueSource@pa.gov">RA-uniqueSource@pa.gov</a> to review.
<b>Funding</b> Please add description and not just dollar amount.	<input type="checkbox"/> State <input type="text"/> <input type="checkbox"/> Federal <input type="text"/>

## EXISTING CONTRACT INFORMATION

Complete the following information for *Existing Contract Method of Procurement* (if applicable).

If there is not an existing procurement, select the **New Procurement** radio button. When selected, you **must** complete the *Estimated Annual Spend if new procurement* field.

Existing Contract Information	
Procurement Method:	<input type="radio"/> IFB <input type="radio"/> IGA <input type="radio"/> ITQ <input type="radio"/> PA <input type="radio"/> RFP <input type="radio"/> RFQ <input type="radio"/> New Procurement
Existing Contract Information:	Contract Number: <input type="text"/> Contract Expires: <input type="text"/> Annual Spend: <input type="text"/> Enter numeric values, No symbols. Estimated Annual Spend if new procurement: <input type="text"/>

Annual Spend is the total contract spend-value

## PROCUREMENT LEAD REQUEST / REQUEST FOR DELEGATION

Choose an option under *Procurement Lead Request*.

When “Agency” is selected to lead the procurement, you **must** complete both fields within the *Request for Delegation* section.

Procurement Lead Request	
We are requesting: <input type="radio"/> DGS/BOP <input type="radio"/> OA/OIT <input type="radio"/> Agency lead this procurement	
Request for Delegation (only applicable if agency requests to lead the procurement)	
Justification for Lead:	<input type="text"/>
The expertise of the Agency in terms of procurement knowledge.:	<input type="text"/>
If approved, the Agency will conduct this procurement in accordance with to Section 518 of the Commonwealth Procurement Code (62 Pa C.S. 518) and policies and procedures within the DGS Procurement Handbook and will post the solicitation to the DGS BOP website.	

## APPROVING AUTHORITY

Complete all fields in this section, as applicable.

After completing the Form you **must** send it for internal approval(s). The Agency Head, as final approver, will submit the Form to DGS/OIT.

**NOTE:** If you have more than one approval required within your agency, the first approver **must** forward to the next approver. The agency approvers should continue with this process to ensure that the agency approval requirements are met.

Approving Authority		
Approving Authority (Agency Head or Deputy reviewing and approving this request)		
Name: *	<input type="text"/>	Email: * <input type="text"/> Date: <input type="text"/>
If you wish to receive a copy of any future emails associated with this request, including approval/disapproval please provide your e-mail address below and you will receive a copy in addition to the Agency Contact Person listed above. Please note: Comptroller's Office and BDISBO will always receive a copy of the approval/disapproval email and need not be listed in this area.		
<input type="button" value="Add Additional Email"/>	Use this option to send copies of the NFP to one or more individuals	
The printed names on this form shall constitute the signature of these individuals and approval for the Agency request. Agencies must ensure that these individuals review the completed form and give their consent to apply their printed name on this form. No handwritten signatures shall be required in order for the form to be considered "signed" by these individuals.		
<input type="button" value="Save"/>	<input type="button" value="Print Preview"/>	<input type="button" value="Submit"/> <small>By clicking this button, the form will be submitted to DGS/OIT depending upon the category selected.</small>
E-mail: <input type="text"/>		<input type="button" value="Send for Internal Approval"/>

**NOTE:** If you try to submit to DGS/OIT without entering an email address for internal approvals, you will receive the following message at the top of your screen. The “No” option should only be chosen when you are **both** the Submitter and Internal Approver.

Do you want Internal Approvals?

Yes No

**This form is to be submitted at the be**

After choosing “Yes”, complete the *E-mail* field and select the **Send for Internal Approval** button.

E-mail:  **Send for Internal Approval**

Afterwards, you will receive a confirmation at the top of the Form as well as an e-mail stating that it has been sent for internal approval. The notification email will contain a link to the Form.

### SAVING THE NFP FORM PRIOR TO SUBMISSION

You can save this Form after completing all mandatory fields. To save your unfinished Form, select the **Save** button.

**The printed names on this form shall constitute the signature of these individuals**  
completed form and give their consent to apply their printed name on this form. No handw

**Save** **Print Pre**

E-mail:

You will receive a confirmation at the top of the Form, as well as an e-mail stating that the Form has been saved.

**NOTICE OF FORTHCOMING PROCUREMENT**  
**Notice Of Forthcoming Procurement Form was saved, but NOT submitted. The ID# is 110704**  
[Return to Form.](#)  
**This form is to be submitted at the beginning of the process, for all procurements which will exceed the dollar thres**

To continue working on the Form, choose the **Edit** radio button, enter the Form’s number in the *Edit Form* field, and select the **Edit** button.

**Notice o**

**Please Enter the ID you wish to Edit**

**This form is to be submitted at the beginning of the process, for all pro**  
**Chapter 7- Thresholds and Delegations.**

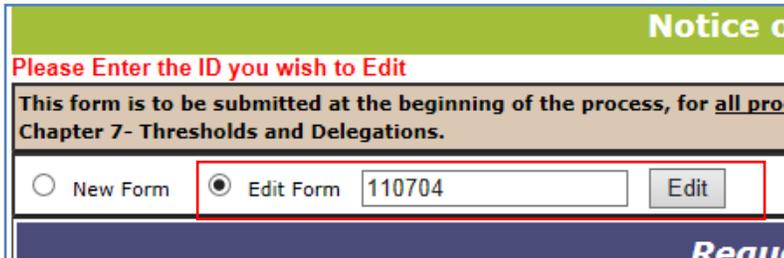
New Form  Edit Form  **Edit**

**Requ**

## APPROVING THE NFP FORM

After a NFP Form has been sent for approval, the Internal Approver will receive an email notification that the Form is awaiting their approval. The email will contain a link to the Form.

The Internal Approver will select the link to access the Notice of Forthcoming Procurement Form. They will then choose the **Edit** radio button, enter the Form's number in the *Edit Form* field, and select the **Edit** button.



The Internal Approver will then scroll down to the Approving Authority section and perform one of the following steps:

- a) Complete the *E-mail* field and select the **Send for Internal Approval** button to continue the internal approval process, OR
- b) As Agency Head and/or final approver, select the **Submit** button to submit the form to DGS/OIT.



**NOTE:** Once submitted to DGS/OIT, anyone that has an e-mail address entered within the NFP Form will receive an email notification that the form has been submitted. The email will contain a link to the Form.

If approved, you will receive an email notification providing details of the approval. A copy of the email notification will be automatically forwarded to Comptroller and the Bureau of Diversity, Inclusion & Small Business Opportunities (BDISBO).

If DGS/OIT returns the Form for correction, you will receive an email notification containing the reason and a link to the Form. Access the link to make the corrections, route again through internal approvals (if needed) and submit to DGS/OIT.

### Award Form

Go to the electronic Award Form (Procurement Forms Website), select the “Enter Form Number” radio button, enter the appropriate ID Number, and select the “Enter” button.

Commonwealth of Pennsylvania	
Award Form	
This form is to be completed <u>by the Agency issuing the Contract/PO</u> for procurements that exceed the dollar thresholds established in Part 1, Chapter 7 of the Procurement Handbook for this identified procurement.	
<ol style="list-style-type: none"> <li>1. Agency provides, if full delegation is granted.</li> <li>2. BOP/OIT provides, if they led the solicitation and the agency executed the resulting contract/PO.</li> <li>3. BOP/OIT provides, if they led the solicitation and executed the resulting contract.</li> </ol>	
<b>Please Choose one of the Following</b>	
<input type="radio"/> Enter Form Number <input style="width: 100px;" type="text"/>	<input type="button" value="Enter"/>
<input type="radio"/> Renew Form	
Status: <input style="width: 100px;" type="text"/>	

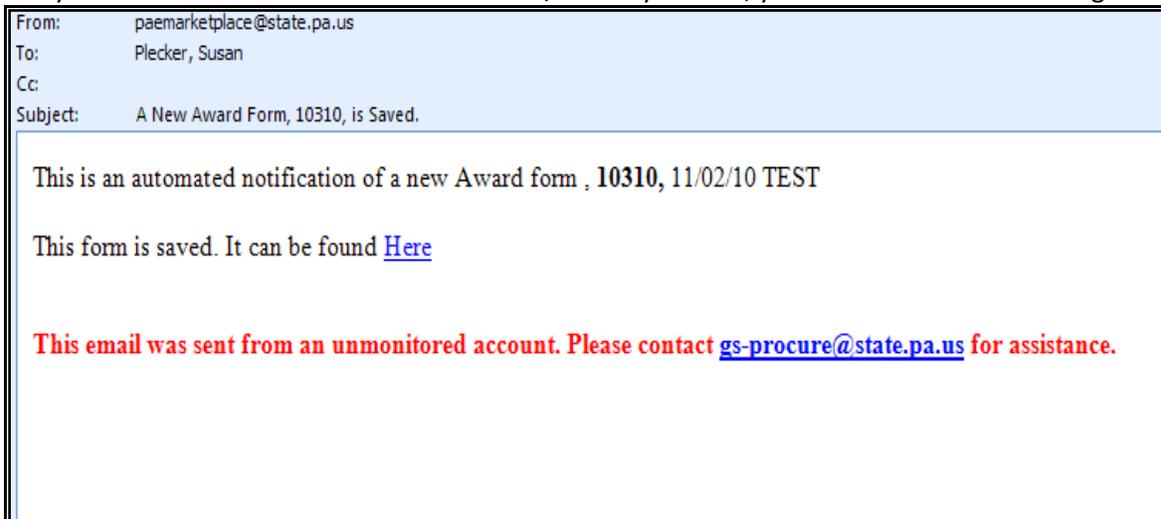
Any information that is requested on this form that was already completed on the Notice of Forthcoming Procurement Form is auto populated for you.

Date:	8/31/2012
Agency:*	Administration
Bureau:*	<input style="width: 100%;" type="text"/>
Agency Contact Person:*	<input style="width: 100%;" type="text"/>
Contact Tel#:*	<input style="width: 100%;" type="text"/> Format : ###-###-####
Contact Email:*	<input style="width: 100%;" type="text"/>
Project Manager:*	<input style="width: 100%;" type="text"/>
Project Title:*	<input style="width: 100%;" type="text"/>
Solicitation Number:*	<input style="width: 100%;" type="text"/>
Description of Project:*	<input type="radio"/> Material <input type="radio"/> Service <input type="radio"/> IT * For IT-Services and IT Materials, please choose IT <input style="width: 100%; height: 30px;" type="text"/>
Method of Procurement:*	<input type="radio"/> IFB <input type="radio"/> IFB-Multiple Award <input type="radio"/> ITQ <input type="radio"/> PA <input type="radio"/> RFP <input type="radio"/> RFP-Multiple Award <input type="radio"/> RFQ (IT) <input type="radio"/> RFQ (Other) <input type="radio"/> To be Determined

Complete the sections that were not auto populated. If there is more than one (1) supplier, complete the [BOP-Contract List](#) and upload to the Documents Section.

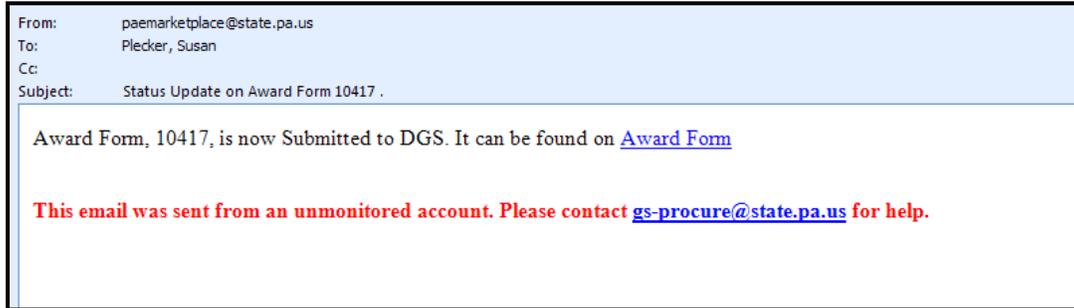
No Of Contracts:*		<input type="text"/>	<input type="button" value="GO"/>	Please click the Go button after Entering the Number of Contracts	
Please enter the information below and <b>attach a spreadsheet</b> containing the list of contracts in the <b>Upload Documents Section</b>					
Contract Number		<input type="text"/>			
Start Date		<input type="text"/>			
End Date		<input type="text"/> (w/o renewals)			
New End Date		<input type="text"/>			
Supplier Name		<input type="text"/>			
Supplier Number		<input type="text"/>			
Supplier FIN#		<input type="text"/> If only SSN, Leave Blank			
Contract Term:*		Original Term: <input type="text"/> year(s) Number of Renewals: <input type="text"/> ea <input type="text"/> year(s) Enter decimal for months			
Contract Value:*		<input type="text"/> Per Original Contract Term without Renewals			
Please identify below the direct labor performed under the contract that will be performed outside the United States and not within the geographical boundaries of a party to the World Trade Organization Government Procurement Agreement and identify the country where the direct labor will be performed.					
Domestic Workforce Utilization: (Mandatory for Services, RFPs and Services Multiple Awards)		Percent Committed on Shore <input type="button" value="Select One"/>		Country (if not in USA or WTO) <input type="text"/>	
SDB Commitment:		%: <input type="text"/>		Contract terms w/o renewals	
		\$ (if % above is based on other than Contract Value) <input type="text"/>		Select SDB Type <input type="button" value="Select One"/>	
A copy of the Domestic Workforce Certification, and a copy of the small diverse business commitments made in the contract must accompany this form, and if applicable, a copy of the Small Business Procurement Initiative self-certification.					
Upload Documents*		<input type="text"/> <input type="button" value="Browse..."/> <input type="button" value="Add"/> <input type="button" value="View"/> <input type="button" value="Remove"/>			
<input type="checkbox"/> I have uploaded the List of Contract Spreadsheet (if applicable). <b>Submit this completed form and attachments within (10) ten days after contract/PO executed.</b> <input type="button" value="Save"/> <input type="button" value="Submit"/> <small>By clicking the Submit button, the form will be submitted to DGS/OIT depending upon the category selected.</small>					

At this time you can save the record or submit to DGS/OIT. If you save, you will receive the following e-mail.



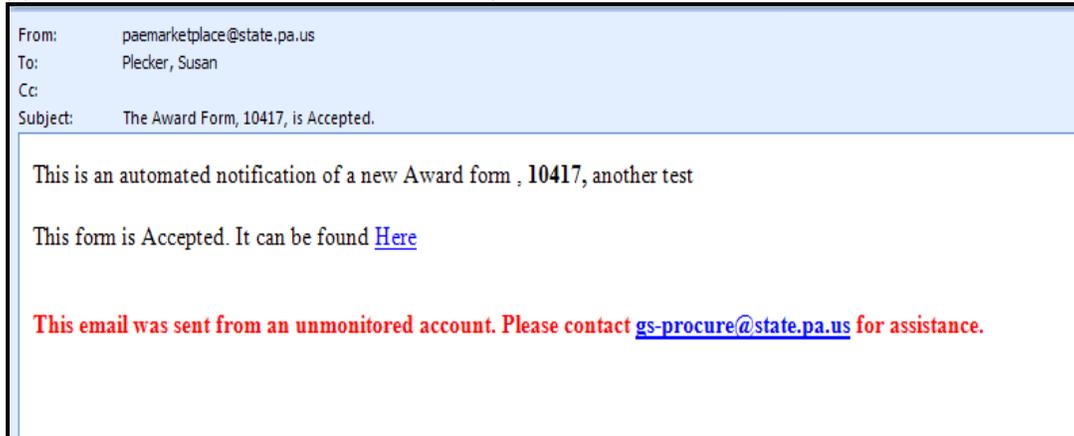
When submitted to DGS/OIT the e-mails will be automatically sent to those previously listed on the NFP Form and no changes can be made to the original e-mail list.

**NOTE:** A copy of this e-mail will also be automatically forwarded to BDISBO.



Once accepted by DGS/OIT the e-mails will be automatically sent to those previously listed on the NFP Form and no changes can be made to the original e-mail list.

**NOTE:** A copy of this e-mail will also be automatically forwarded to BDISBO.



### Award Form Renewals

Go to electronic Award Form (Procurement Forms Website), select the “Renew Form” radio button, enter the appropriate ID Number, and select the “Renew” button.

<b>Commonwealth of Pennsylvania</b>	
<b>Award Form</b>	
This form is to be completed by the Agency issuing the Contract/PO for procurements that exceed the dollar thresholds established in Part 1, Chapter 7 of the Procurement Handbook for this identified procurement.	
<ol style="list-style-type: none"><li>1. Agency provides, if full delegation is granted.</li><li>2. BOP/OIT provides, if they led the solicitation and the agency executed the resulting contract/PO.</li><li>3. BOP/OIT provides, if they led the solicitation and executed the resulting contract.</li></ol>	
<b>Please Choose one of the Following</b>	Status: <input type="text"/>
<input type="radio"/> Enter Form Number <input type="radio"/> Renew Form <input type="text"/>	<input type="button" value="Renew"/>

Any information that was previously completed on the original Award Form is auto populated for you.

The following fields must be completed for renewal.

For original contract (ex: 2 ea 1 yr) Remaining (ex: 1 ea 1yr)	Renewal:*	Number of Optional Renewals <input type="text"/> Years: <input type="text"/>
		Remaining Optional Renewals <input type="text"/> Years: <input type="text"/>

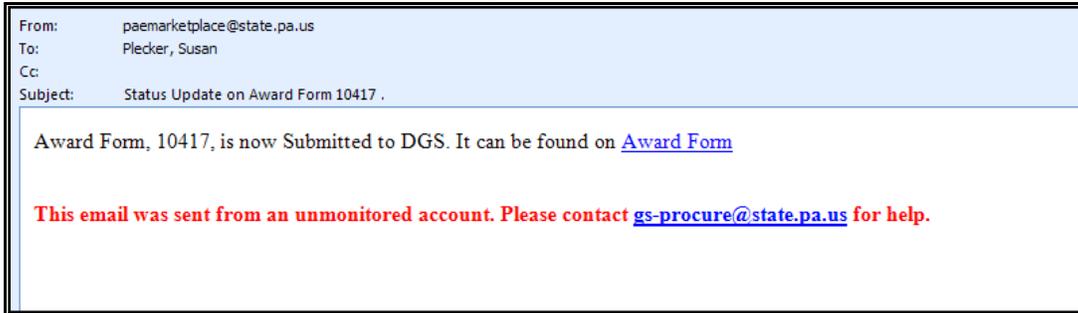
No Of Contracts:*	<input type="text" value="2"/> <input type="button" value="GO"/> Please click the Go button after Entering the Number of Contracts	
	<b>Please fill the information below and attach a new list of contract sheet with updated end dates.</b>	
	Contract Number	<input type="text" value="All"/>
	Start Date	<input type="text" value="2010-12-29"/>
	End Date	<input type="text" value="2016-03-03"/> (w/o renewals)
	New End Date	<input type="text"/> <span style="color: red;">Must use calendar</span>
	Supplier Name	<input type="text" value="Multiple"/>
Supplier Number	<input type="text"/>	
Supplier FIN#	<input type="text"/> If only SSN,Leave Blank	

Select “Submit” for Renewal acceptance.

<b>Submit this completed form and attachments within (10) ten days after contract/PO executed.</b>	
<input type="button" value="Save"/>	<input type="button" value="Submit"/>
By clicking the Submit button, the form will be submitted to DGS/OIT depending upon the category selected.	

When submitted to DGS/OIT the e-mails will be automatically sent to those previously listed on the NFP Form and no changes can be made to the original e-mail list.

**NOTE:** A copy of this e-mail will also be automatically forwarded to BDISBO.



Once accepted by DGS/OIT the e-mails will be automatically sent to those previously listed on the NFP Form and no changes can be made to the original e-mail list.

**NOTE:** A copy of this e-mail will also be automatically forwarded to BDISBO.

