

Attachment A: Request for Limited Sources Memo Format

**LIMITED SOURCES JUSTIFICATION**  
**ORDER >\$3,000**  
**FAR PART 8.405-6 (a) (B) & (b) (2)**

**2237 Transaction # or Vista Equipment Transaction #:** 646-12-4-4622-0114

This acquisition is conducted under the authority of the Multiple Award Schedule Program. The material or service listed in par. 3 below is sole source, therefore, consideration of the number of contractors required by FAR Subpart 8.4 – Federal Supply Schedules, is precluded for the reasons indicated below.

**Restricted to the following source:** Provide original manufacturer's name for material or contractor's name for service. (If a sole source manufacturer distributes via dealers, ALSO provide dealer information.)

Manufacturer/Contractor: Contractor – AllSteel, Inc.

Manufacturer/Contractor POC & phone number: Ron Hartman – 563-272-7386

Mfgr/Contractor Address: 2210 2<sup>nd</sup> Avenue, Muscatine, IA 52761-5263

Dealer/Rep address/phone number: Natural Office Solutions, Inc., 100 W. Main Street, Suite 260, Carnegie, PA 15106 (POC: Brian Marzka – Ph.: 724-339-1794)

☒ The requested material or service represents the minimum requirements of the Government.

**(1) AGENCY AND CONTRACTING ACTIVITY:**

Department of Veterans Affairs  
VA Pittsburgh Healthcare System  
1010 Delafield Road  
Pittsburgh, PA 15215

**VISN: 4**

**(2) NATURE AND/OR DESCRIPTION OF ACTION BEING APPROVED:**

Limited Source Justification, I.A.W. FAR 8.405-6 (a) (B) and (b) (2). (Justification to award on a Sole Source basis to AllSteel, off their GSA Contract#GS-28F-0001V

**(3) (a) A DESCRIPTION OF THE SUPPLIES OR SERVICES REQUIRED TO MEET THE AGENCY'S NEED:** Furnish and install AllSteel Office Furniture Items

**(b) ESTIMATED DOLLAR VALUE:** \$85,524.23

**(c) REQUIRED DELIVERY DATE:** 11/15/2012

**(4) IDENTIFICATION OF THE JUSTIFICATION RATIONALE (SEE FAR 8.405-6), AND IF APPLICABLE, A DEMONSTRATION OF THE PROPOSED CONTRACTOR'S UNIQUE QUALIFICATIONS TO PROVIDE THE REQUIRED SUPPLY OR SERVICE. (CHECK ALL THAT APPLY AND COMPLETE)**

☒ Specific characteristics of the material or service that limit the availability to a sole source (unique features, function of the item, etc.). Describe in detail why only this suggested source can furnish the requirements to the exclusion of other sources.

It is essential to the government's needs to purchase the following AllSteel Office furniture items, since they are needed to be added and to reconfigure parts and pieces of existing AllSteel product at the VA Pittsburgh Healthcare System, and only AllSteel Furniture will be able to fit with the existing AllSteel Furniture. In addition, it is essential to purchase the AllSteel Furniture listed below, from AllSteel, off their GSA Contract# GS-28F-0001V, since, AllSteel, Inc. is only AllSteel is authorized to sell and have installed the items off their GSA Contract, in the Pittsburgh, PA area, where the items are needed: (See attached emails from VA Interior Designer Kyra Krotec, dated 8/09/2012, and from Ron Hartman, from AllSteel, dated 8/21/2012, in the Contract File under DP03).

☐ A patent, copyright or proprietary data limits competition. The proprietary data is:

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☐ These are "direct replacements" parts/components for existing equipment.

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☒ The material/service must be compatible in all aspects (form, fit and function) with existing systems presently installed/performing. Describe the equipment/function you have now and how the new item/service must coordinate, connect, or interface with the existing system.

It is essential to the government's needs to purchase the following AllSteel Office furniture items, since they are needed to be added and to reconfigure parts and pieces of existing AllSteel product at the VA Pittsburgh Healthcare System, and only AllSteel Furniture will be able to fit with the existing AllSteel Furniture.

☐ The new work is a logical follow-on to an original Federal Supply Schedule order provided that the original order was placed in accordance with the applicable Federal Supply Schedule ordering procedures. The original order must not have been previously issued under sole source or limited source procedures.

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☐ An urgent and compelling need exists, and following the ordering procedures would result in unacceptable delays.

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**(5) DESCRIBE WHY YOU BELIEVE THE ORDER REPRESENTS THE BEST VALUE CONSISTENT WITH FAR 8.4 TO AID THE CONTRACTING OFFICER IN MAKING THIS BEST VALUE DETERMINATION:**

Per FAR 8.8.404 (d), the Order represents the Best Value, since it was placed I.A.W. procedures at 8.405, and since the Contractor's price is acceptable to the Government and they Contractor can meet the Government's Delivery Schedule for furnishing and installing the items.

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**(6) DESCRIBE THE MARKET RESEARCH CONDUCTED AMONG SCHEDULE HOLDERS AND THE RESULTS OR A STATEMENT OF THE REASON MARKET RESEARCH WAS NOT CONDUCTED:**

The items are available off the GSA FSS, not to mention are sold in the commercial marketplace for nongovernmental use, and therefore considered to be Commercial Items.

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**(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION:**

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**(8) A STATEMENT OF THE ACTIONS, IF ANY, THE AGENCY MAY TAKE TO REMOVE OR OVERCOME ANY BARRIERS THAT LED TO THE RESTRICTED CONSIDERATION BEFORE ANY SUBSEQUENT ACQUISITION FOR THE SUPPLIES OR SERVICES IS MADE:**

N/A

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**(9) REQUIREMENTS CERTIFICATION:** I certify that the requirement outlined in this justification is a Bona Fide Need of the Department of Veterans Affairs and that the supporting data under my cognizance, which are included in the justification, are accurate and complete to the best of my knowledge. I understand that processing of this limited sources justification restricts consideration of Federal Supply Schedule contractors to fewer than the number required by FAR Subpart 8.4. *(This signature is the requestor's supervisor, fund control point official, chief of service or someone with responsibility and accountability.)*



8/23/12

SIGNATURE

DATE

Kyra Krotec  
NAME

Interior Designer  
TITLE

FMS  
SERVICE LINE/SECTION

VAPHS University Drive  
FACILITY

**(10) APPROVALS IN ACCORDANCE WITH FAR 8.405-6(h):**

**a. CONTRACTING OFFICER'S CERTIFICATION (required):** I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.

  
CONTRACTING OFFICER'S SIGNATURE

8/23/12  
DATE

Ronald Mazzei  
NAME AND TITLE

HJ Heinz  
FACILITY

**HIGHER LEVEL APPROVAL (For orders over \$500,000):** ☐ REQUIRED ☐ NOT REQUIRED

**b. QA OFFICER:** I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief. *\*This signature may be the VISN NCM/PCM if the Contracting Officer and Contracting Supervisor is the same individual.*

SIGNATURE

DATE

NAME AND TITLE

**c. NCM/DESIGNEE:** I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.

  
SIGNATURE

8/27/2012  
DATE

Michael J. Lamb

NAME

VISN X NCM