**PRICE REASONABLENESS DETERMINATION**

1. **WAS ADEQUATE COMPETITION AVAILABLE?** Choose an item.

**If NO, PLEASE EXPLAIN WHY NO OTHER SOURCE IS ACCEPTABLE:**

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| --- |
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|  |

1. **PRICE REASONABLENESS BASED ON (Check one or more):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NUMBER |  | DATED |  | PAGE NO. |  |

**COMMERCIAL CATALOG/PUBLISHED PRICE LIST**

|  |
| --- |
|  |

**ESTABLISHED MARKET PRICE:**

|  |  |
| --- | --- |
| MEANS OF VERIFICATION |  |

**COMPARISON WITH PRIOR PURCHASE OF SAME OR SIMILAR ITEM/SERVICE:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CONTRACTOR | |  | | | | | | | | |
| ORDER/CONTRACT NO. | | |  | | | DATE PURCHASED | | |  | |
| QUANTITY |  | | | UNIT |  | | | UNIT PRICE | |  |
| BASIS FOR DETERMIING PRIOR PRICE REASONABLENESS | | | | | | |  | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |

**PRICE ANALYSIS BY BUYER/USER/TECHNICAL PERSONEL (attach review of technical data, evaluation of**

**sample, etc.)**

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|  |

**OTHER: (Describe specific reason, e.g. valid purchase request, minimum order quantity, etc.)**

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**DEPARTMENT APPROVAL**

On behalf of my business unit, I certify that the information submitted is accurate and complete. I understand that this document is subject to RBC policy, audit and public review.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name:** |  | Signature: |  | Date: |  |
| **Business Unit:** |  | Email: |  | Ext.: |  |

**OVERVIEW**

**Price Reasonableness Determination**.

A written price reasonableness determination is required to determine if prices bid or offered

are fair and reasonable when:

1. competition is restricted or lacking,
2. the prices offered do not appear to be fair and reasonable,
3. sole source procurements
4. a single response (Quote, bid or offer) received
5. contract changes/modifications
6. contract renewals
7. procurements conducted under the authorized enhancement plan (EO35) See 3.11.g.