

Village of Orland Park
Sole Source Request Form
Required for Purchases \$5,000 - \$24,999

Department Police Date 11/7/2025
Division (if applicable) _____
Description of Good/Service Axon Taser 10 & Cartridges
Manufacturer or Supplier Axon Enterprise
Dollar Amount \$27,894.00 Co-op Purchasing Contract # _____
Have Adequate Funds Been Budgeted For This Purchase? Yes ☒ No ☐
Account number(s) 2405040-460180

Option 1 - Sole Source Justification

A Sole Source Purchase is available from only one supplier and must meet at least one of the following criteria (check the appropriate box):

- | | |
|--|--|
| ☐ One-of-a-Kind | The commodity or service has no competitive product alternatives available on the market. |
| ☒ Compatibility | The commodity or service must match existing brand of equipment for compatibility. |
| ☐ Replacement Part | The commodity is a replacement part for a specific brand of existing equipment. |
| ☒ Operation Continuity | The commodity or service is needed to maintain operational continuity. |
| ☐ Unique Design | The commodity or service must meet physical design or quality requirements. |
| ☐ Delivery Date | Only one supplier can meet necessary delivery requirements. |
| ☐ Emergency | PER VILLAGE CODE 1-16-3 (E) : URGENT NEED for the item or service does not permit soliciting competitive bids. |
| ☐ Other | |

Explain how your purchase of goods or services meets one or more of the above criteria for a valid sole source

This is an additional one time purchase to existing Axon contract #20240512 for Tasers 10s and cartridges.

Price Reasonableness

I determined that the price is reasonable for one of the following reasons:

☐ Relevant documentation attached

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| ☐ I compared the proposed price to prices I previously paid for the same or similar services. |
| ☐ I compared the proposed price to current published catalog, price lists, or market prices as documented in the attachments. |
| ☐ I compared the proposed price to rough yardsticks and did not discover significant inconsistencies that warrant additional inquiry. |
| ☐ Based on my knowledge of the market, my experience of prior similar proposals, or knowledge imparted by technical experts. |
| ☐ The price is set by law or regulations. |
| ☐ Market research reveals that same or similar goods or services are available for a similar price. |

Option 2 - Joint or Cooperative Purchasing

Purchase through Cooperative Purchasing (attach contract documentation)

- | | |
|--|---|
| ☐ State of Illinois Joint Purchase Program | ☐ Omnia Partners - Public Sector |
| ☐ NWMC/Suburban Purchasing Cooperative | ☐ National Intergovernmental Purchasing Alliance |
| ☐ The GSA Schedules | ☐ The National Cooperative Purchasing Alliance |
| ☐ Sourcewell | ☐ HGACBuy |
| ☐ Nat'l Association of State Procurement Officials (NASPO) ValuePoint | ☐ Municipal Partnering Initiative (MPI) |
| ☐ Choice Partners Cooperative | ☐ Midwestern Higher Education Compact |
| ☐ The Interlocal Purchasing System (TIPS) | ☐ National Purchasing Partners (NPPGov) |
| ☐ Purchasing Cooperative of America | ☐ 1Government Procurement Alliance (1GPA) |
| ☐ Good Buy Purchasing Cooperative | ☐ National BuyBoard (BuyBoard) |
| | ☐ Other: _____ |

Requested By:

Name	Signature	Date
Staff Contact Lieutenant Kerry Kelly-Valan		11/7/2025
Department Head Chief Eric Rossi		11/7/2025

Did legal review Terms & Conditions from vendor, if applicable? ☐ Yes ☐ No ☐ N/A

Have you received a CRT summary from the Risk Manager? ☐ Yes ☐ No ☐ N/A