OPRPM Form 152
(07/2012)

UNIVERSITY OF HAWAII
REQUEST FOR EMERGENCY PROCUREMENT

TO: _____
Name of Fiscal Officer

FROM: _____
Name of Principal Investigator, Department Head, Administrator

Pursuant to APM Section A8.260, the Department requests approval for this emergency procurement.

Date: After the fact: ☐ Yes ☐ No
Nature of the Emergency:

Vendor:	Amount:

Description and purpose of goods, services, or construction to be purchased:

Reason for Vendor Selection:

Direct questions to: _____ Phone: _____

I certify that the information provided above is, to the best of my knowledge, true and correct.

_____ _____
Full Name of Principal Investigator, Department Head, or Administrator — Signature — Date

Approved:

_____ _____
Full Name of Fiscal Officer — Signature — Date

_____ _____
Full Name of Vice President or Chancellor (if applicable) — Signature — Date

APPROVED / DISAPPROVED:

_____ _____
Director, Office of Procurement and Real Property Management (if applicable) — Date

APPROVED / DISAPPROVED:

_____ _____
President, University of Hawaii (if applicable) — Date