

TOWN OF DANBY

PURCHASING POLICY

When purchases or services (contracts for public work other than professional services) are needed, the following thresholds should be followed and the correct level of quote or bid used.

PURCHASE ORDERS

All purchases and services over \$250, require a Purchase Order (PO) be submitted. A PO number must be produced before those purchases or services are rendered to ensure that funds are available. Purchase local when feasible.

WRITTEN QUOTES

Purchases and Services between \$250 and \$20,000, require three (3) written quotes and the approval of the road commissioner and/or Select Board member(s). Said quotes must be documented (date, price, vendor and/or contractor) and maintained in a purchase/service log binder. This Binder, with all written quotes in chronological/date order is to be kept for the year and submitted at budget time.

COMPETITIVE BIDDING

Purchases and Services of \$20,000 or more require solicitation of competitive bidding. All bids must be properly advertised in at least one of the Town's official newspapers. (NewsGuide).

Utilities, wages, withholdings, insurance, notes, dues, and all other expenditures shall be exempt from the purchasing policy.

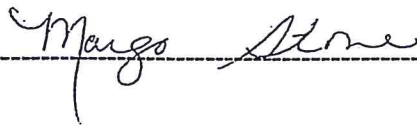
EMERGENCY PURCHASES AND SERVICES

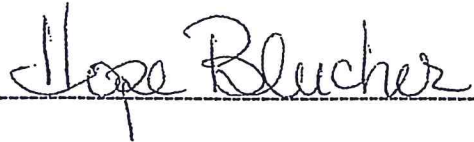
In the event of an emergency, purchases and services are exempt from the procedures described herein; with the approval of the road commissioner and/or Select Board member(s).

An emergency situation shall be defined as one which threatens the lives or health of the people, the property of the municipality, or the delivery of necessary services to the citizens of Danby.

ADOPTED BY THE TOWN OF DANBY SELECT BOARD this 10th day of December, 2015.









Town of Danby

Budget Transfer

Date _____

From Account _____

To Account _____

Amount _____

Reason _____

Dept. Head _____

Finance Approval _____

Board Approval _____

495406

Purchase Order

TO	DATE
ADDRESS	DATE REQUIRED
CITY, STATE, ZIP	TERMS
SHIP TO	HOW SHIPPED
ADDRESS	REQ. NO. OR DEPT.
CITY, STATE, ZIP	FOR

QUANTITY	DESCRIPTION	PRICE	UNIT
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

IMPORTANT Purchase Order Number must appear on all invoices - packaging, etc. Please notify us immediately if you are unable to complete the order by date specified.	Please send _____ copies of your INVOICE with ORIGINAL BILL OF LADING. PURCHASING AGENT
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