



# AGENCY PROCUREMENT REQUEST FORM

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST  
STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

AGENCY NAME \_\_\_\_\_  
CONTACT NAME \_\_\_\_\_  
CONTACT PHONE # \_\_\_\_\_  
CONTACT EMAIL \_\_\_\_\_

CONTRACT TITLE \_\_\_\_\_  
\_\_\_\_\_

FUNDING SOURCE \_\_\_\_\_

BASE TERM ESTIMATED CONTRACT VALUE:                   \$

CONTRACT BASE TERM                                    \_\_\_\_\_  
CONTRACT EXTENSION TERM                           \_\_\_\_\_  
CONTRACT TRANSITION TERM                           \_\_\_\_\_  
\_\_\_\_\_

PROCUREMENT TYPE: \_\_\_\_\_

<b>AGENCY MUST OBTAIN THE FOLLOWING PRE-APPROVALS BEFORE THE PROCUREMENT REQUEST IS SUBMITTED</b> <i>Include the pre-approval documentation from the specified entity(s)</i>
Office of Information Technology – Submit to <a href="mailto:oit.core@tech.nj.gov">oit.core@tech.nj.gov</a> ; also see <a href="#">OIT Policy</a>
Office of Homeland Security and Preparedness – If the Contractor will be handling sensitive data, please complete the Data Security Questions on Page 2.
Office of Management and Budget
Division of Risk Management – Modifications to standard Indemnification, Limitation of Liability & Insurance
Treasury Administration – For fleet requests
Division of Law – Approval to include Liquidated Damages or Penalties
Department of Labor – Public Works Contractors Registration Act and Prevailing Wage
Agency Chief Information Security Officer or Subject Matter Expert – Determination of whether or not the Vendor will have access to the Garden State Network? Will the goods or services sought require and/or make use of internal or external network connections.
Agency Chief Information Security Officer or Subject Matter Expert – Do the goods or services sought have a SaaS or Artificial Intelligence (AI) component?

<b>AGENCY MUST COMPLETE THE FOLLOWING CHECKLIST AND INCLUDE ALL ITEMS AS NECESSARY</b>
<b>Purpose and Intent</b> - Summary of what you want to procure and why
<b>Background</b> - Historical or Legislative summary, including policy, statutory and regulatory mandates
<b>Scope of Work</b> – Include all Contractor Requirements
<b>Bid Solicitation Specific Attachments</b> - Documents that Bidders should review prior to Quote Submission
<b>Bid Solicitation Specific Definitions</b>
<b>Contract Deliverables with proposed dates</b>
<b>Bidder Quote Submission Requirements</b> - What is needed to evaluate the Quote
<b>Price Sheet and Price Sheet Instructions</b>
<b>Award Methodology</b> - Multiple contractors, mini-bid, etc.
<b>Method of Operation</b> - Instructions and notes for State Contract Manager and / or Agency Use
<b>Bid Bond</b>
<b>Performance Security/Retainage</b>
<b><a href="#">Applicable Commodity Codes</a></b>

Submit this form with required information to [centralintake@treas.nj.gov](mailto:centralintake@treas.nj.gov)  
Submission of a Procurement Request Form does not represent approval of the specification.

**DATA CLASSIFICATION – TO BE COMPLETED BY AGENCY**

The following questions must be completed by the Agency as a part of OHSP’s Security Review process. Please provide accurate responses as they apply to the scope of the anticipated project or engagement. Agencies intending to submit a Central Intake request to DPP for an advertised procurement or Waiver should submit a completed form to [riskreview@cyber.nj.gov](mailto:riskreview@cyber.nj.gov) prior to Central Intake.

DESCRIPTION OF SERVICES	
1. Provide a description of the project and services provided to the State of New Jersey or the purpose of the access to State information systems, internal networks, and/or sensitive information:	
2. Indicate the reason(s) for this request: <i>(choose all that apply)</i> <input type="checkbox"/> <b>New Infrastructure/System Build</b> <input type="checkbox"/> <b>Data/System Migration</b> <input type="checkbox"/> <b>On-prem to SaaS</b> <input type="checkbox"/> <b>SaaS</b> <input type="checkbox"/> <b>Services</b>	
3. Indicate the proposed contract vehicle used for this project. <input type="checkbox"/> <b>T3121</b> <input type="checkbox"/> <b>RFP</b> <input type="checkbox"/> <b>M4002</b> <input type="checkbox"/> <b>OIT (State) Enterprise Cloud</b> <input type="checkbox"/> <b>Waiver</b> <input type="checkbox"/> <b>Other:</b> (insert here) <input type="checkbox"/> <b>Unknown</b>	
DATA CLASSIFICATION	
4. Identify the data types that will be generated, accessed, processed, stored, and/or transmitted for this engagement with the State of New Jersey. For further guidance, refer to the <i>Statewide Information Security Manual RA-05</i> .	
A. <input type="checkbox"/> <b>Public or Non-Sensitive Data</b> <input type="checkbox"/> <b>Business Sensitive Data</b> <input type="checkbox"/> <b>Personally Identifiable Information (PII)</b> <input type="checkbox"/> <b>Social Security Numbers</b> <input type="checkbox"/> <b>Protected Health Information (HIPAA)</b> <input type="checkbox"/> <b>Federal Tax Information (IRS Pub 1075)</b> <input type="checkbox"/> <b>Criminal Justice Information (CJIS)</b> <input type="checkbox"/> <b>Protected Critical Infrastructure Information (PCII)</b> <input type="checkbox"/> <b>Other Sensitive Information not listed above</b>	B. <b>List the specific data elements (e.g., first and last name, email address, IP address, etc.) involved as a part of this engagement with the State of New Jersey:</b>
DATA SECURITY CATEGORIZATION	
5. For each category below, select the level of impact that best identifies the protection needed from unauthorized alteration, access, or loss of the data. For further guidance, refer to the <i>Statewide Information Security Manual RA-06</i> .	
<b>Confidentiality</b>	<input type="checkbox"/> <b>High</b> <input type="checkbox"/> <b>Medium</b> <input type="checkbox"/> <b>Low</b>
<b>Integrity</b>	<input type="checkbox"/> <b>High</b> <input type="checkbox"/> <b>Medium</b> <input type="checkbox"/> <b>Low</b>
<b>Availability</b>	<input type="checkbox"/> <b>High</b> <input type="checkbox"/> <b>Medium</b> <input type="checkbox"/> <b>Low</b>
<b>Criticality (for Agency)</b>	<input type="checkbox"/> <b>Mission Critical</b> <input type="checkbox"/> <b>Business Critical</b> <input type="checkbox"/> <b>Non-Critical</b>
DATA HOSTING AND ACCESS	
6. Will the project involve a Software as a Service (SaaS) component? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	
7. Is Artificial Intelligence (AI) or Machine Learning (ML) a part of the proposed solution? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	
8. Where will the data be hosted? <input type="checkbox"/> <b>On-prem</b> <input type="checkbox"/> <b>OIT (State) Enterprise Cloud</b> <input type="checkbox"/> <b>AWS</b> <input type="checkbox"/> <b>Azure</b> <input type="checkbox"/> <b>Other:</b> (insert here) <input type="checkbox"/> <b>Private</b> <input type="checkbox"/> <b>N/A</b> Provide the location of where data is stored (e.g., US-East, US-West, or the name of the State where servers are located):	
9. Will the implementation be public-facing or internal (NJ Employees only)? <input type="checkbox"/> <b>Public</b> <input type="checkbox"/> <b>Internal</b>	
10. Who will be granted access to the data? <input type="checkbox"/> <b>State of NJ employees only</b> <input type="checkbox"/> <b>Public users</b> <input type="checkbox"/> <b>Third Party Vendor(s)</b> <input type="checkbox"/> <b>Subcontractor(s)</b>	

**FOR DIVISION OF PURCHASE AND PROPERTY USE ONLY**

DATE RECEIVED: \_\_\_\_\_

CONTROL NUMBER: \_\_\_\_\_

APPLICABLE BUYING UNIT \_\_\_\_\_

RETURNED FOR REVISIONS

DATE: \_\_\_\_\_

REASON: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CANCELLED

DATE: \_\_\_\_\_

REASON: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_