Volume X - Parts xxxx to xxxx

Navy Marine  
 Corps  
 Acquisition  
 Regulation  
 Supplement

**Issued Fiscal Year 2019 by the:**

**GENERAL SERVICES ADMINISTRATION**

**DEPARTMENT OF DEFENSE**

**NAVY MARINE CORPS ACQUISITION REGULATIONS SYSTEM**

**TITLE#-NAVY MARINE CORPS ACQUISITION REGULATIONS SYSTEM**

**Chapter#**

**Navy Marine Corps Acquisition Regulation System**

**Volume #**

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# ANNEX 12 - Waiver Request for Appointing a Non-DON Employee as a Contracting Officer

In accordance with 5201.603, HCAs or their authorized designees shall notify DASN(P) of a planned issuance of a contracting officer appointment and warrant to a non-DON employee, except when a DON activity is designated HCA for a joint-contracting operation. The notification and/or waiver request must address the following information:

**I.** **Identify Non-DON Employee to be Delegated Contracting Authority**

a. Name of Nominee (as it will appear on the SF 1402, Certificate of Contracting Officer Appointment)

b. Grade/Series or Military Rank

c. Position/Title

d. Description of Duties

e. Activity Name/DODAAC

**II.** **Describe How the Qualifications of the Nominee Meet the Requirements for the Recommended Level of Delegation**

a. Education\*

b. Specialized Experience

c. Relevant Training\*

d. Other Qualifications (*e.g.* DAWIA Career Field Certifications, Defense Acquisition Corps Membership)\*

*\*Note: Submit documentation to substantiate credentials/education completed.*

**III.** **Describe Extent of Contracting Authority to be Delegated**

a. Type of Appointment (*e.g*. PCO, ACO, Ordering Officer)

b. Dollar Threshold (*e.g*. Unlimited, Limited to Specific Dollar Value)

c. Type of work/products/services nominee will be authorized to procure or administer

d. Limitations (e.g. Contract Type; Competitive or Non-Competitive Actions, etc.)

e. Appointment Term

**IV.** **Provide Rationale to Support Delegation of Contracting Authority**

a. Explain why this delegation is necessary and how it results in a more efficient execution and administration of the HCAs contracting operations.

b. Identify the anticipated workload to support the type of appointment, including the available resources at the Nominee’s Organization.

c. Describe the internal controls that are or will be in place at the Nominee’s Organization and at the HCA/delegating office to ensure efficient and effective execution and management oversight of delegated authority.