State of California | Department of General Services | Office of State Publishing (OSP)

Printing Services Exemption Request (PSER)

DGS OSP 0550 (Rev 08/2022)

All fields are required (enter "N/A" if not applicable). Email this completed form and supporting documentation to the Statewide In-Plant Operations Manager at inplantopsmanager@dgs.ca.gov.

| | tion | | | | | | |
|---|---------------------------------------|--------------------|-----------------|-----------------|-----------------|-----------------------|------------------------------|
| AGENCY NAME | | | | | | | DATE OF REQUEST |
| Project Specifica | ations | | | | | | |
| IMELINE 30 Day | ys Greate | r Than 30 Days | If less that | n 30 days, plea | se refer to the | Timeline section on p | page 3 for more information. |
| ROJECT TITLE | | | | | | | PROJECT DUE DATE |
| PROJECT DESCRIPTION | | | | | | QUANTITY NEEDED | SAMPLES INCLUDED Yes No |
| ROJECT REQUIREMENTS (SI | IZE, STOCK, NUMBER O | F PAGES, INK COLOR | , FINISHING ANI | D PACKAGING, | AND OTHER PRO | JECT REQUIREMENTS) | |
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| Project Terms | | | | | | | |
| | | | | | | | |
| DRDER TYPE | Contract Torm | | | | | | |
| ORDER TYPE | Contract Term: | | (OTADI DATE) | | | | (FAID DATE) |
| PRDER TYPE | Contract Term: | | (START DATE) | | | | (END DATE) |
| ORDER TYPE Contract Agreement | | | (START DATE) | | | | (END DATE) |
| DRDER TYPE | | | · | | | | |
| DRDER TYPE Contract Agreement Interagency Agreeme | ent (IA) IA Term: | | (START DATE) | | | | (END DATE) |
| ORDER TYPE Contract Agreement | | | · | ☐ Other: | | | |
| DRDER TYPE Contract Agreement Interagency Agreeme Single Order | ent (IA) IA Term: | | (START DATE) | Other: | | | |
| | ent (IA) IA Term: | | (START DATE) | ☐ Other: | | | |
| DRDER TYPE Contract Agreement Interagency Agreeme Single Order | ent (IA) IA Term: Recurring Order: | | (START DATE) | ☐ Other: | | | |

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| Customer Contact | | | | | | |
|---|-------|--|--|--|--|--|
| CONTACT NAME | | | | | | |
| PHONE | EMAIL | | | | | |
| RECIPIENT (IF DIFFERENT THAN CONTACT NA | AME) | | | | | |
| DELIVERY ADDRESS | | | | | | |
| OSP CUSTOMER SERVICE REPRESENTATIVE | | | | | | |
| SPECIAL INSTRUCTIONS | | | | | | |

| OSP Use Only | | enied | |
|--------------------|---------------------|--------------------------|------|
| | Explanation: | | |
| DATE RECEIVED | | | |
| DAYS FROM DUE DATE | | | |
| | Statewide | | |
| | In-Plant Operations | FULL NAME (please print) | |
| | Manager: | SIGNATURE | DATE |

Instructions | DGS OSP Form 0550

All fields on page one must be completely and accurately filled out in order for the form to be accepted and processed by OSP. All agencies should consult their OSP Customer Service Representative prior to filling out and submitting this form. Please see additional information for each field on page one below:

Agency Information

Agency Name: Identify the agency (department, board, or commission) requesting the exemption.

Date of Request: Identify the date the exemption was submitted. This date cannot be more than three (3) days prior to the date of the submitted email.

Timeline: Mark *one* of the two boxes to indicate the amount of time OSP has to evaluate the project.

- Per SAM Section 2811, exemption requests must be submitted at least 30 days prior to the project due date or early enough to provide OSP the same amount of time it would take a private sector printer to onboard the project, whichever is longer.
- OSP typically processes Printing Service Exemption Requests within 3–5 business days but may take longer, if necessary.
- In rare circumstances, time frames may be waived for exemptions necessitated by extraordinary circumstances outside the submitting agency's control, as determined by OSP. Leave the timeline boxes unchecked and include a written justification with the submission if you would like to submit your PSER with less than a 30-day timeline.

Project Specifications

Project Title: Identify the print project for which the exemption is requested.

Project Due Date: Identify the date by which the exemption *must* be received by the submitting agency. This should line up with the Timeline selection.

Project Description: Provide a summary of the print project for which the exemption is requested.

Quantity Needed: Identify the total quantity of the print product needed. Print orders that exceed the quantity identified on the exemption may result in non-payment of invoices.

Samples Included: Check one of the two boxes to indicate whether or not samples of work to be completed are included in the exemption package.

Project Terms

Order Type: Select *one* to identify whether the exemption will be for a private sector contract term; interagency agreement term; or single order.

Contract or Interagency Agreement Term: If the exemption is approved, it will be valid for the term of the agreement.

Recurring Order: This should only be selected if the order type is either a contract or interagency agreement.

Desired Printer: Identify the desired printer for the project if the exemption is approved. If the project will be subject to a competitive bid process after approval, please indicate "Competitive Bid."

Printer Estimate: Provide the estimated value of the print work based on either a quote/estimate from the desired vendor or the print budget allocated for the project.

 A copy of the quote/estimate or the Scope of Work/ Interagency Agreement must be included with the submission of this form.

Justification for Exemption: Provide information about why an exemption is needed.

Customer Contact

Contact Name: Identify the agency's contact person for this exemption request and provide their name, phone number, and email address. OSP will contact them with additional questions and the final approval or denial of the exemption.

Recipient: Complete this line if a person other than the project contact will be receiving the completed print work.

Delivery Address: Identify the delivery address for the completed print work.

OSP Customer Service Representative: Identify your agency's designated OSP customer service representative.

Special Instructions: Include any special information OSP should know regarding this request.

Supporting Documentation

Required Documents:

- Include a sample or color photocopy of the project, as well as, detailed specifications of the materials required and the final product.
- Include the quote or estimate from the desired printer, or the Scope of Work/Interagency Agreement depending on what was entered under Order Type in the Project Terms section.

Any incorrect or missing information will result in the form being returned to the sender for corrections. If a PSER is returned for correction, the 30-day minimum time frame will not apply until the corrected PSER is submitted. Submission and project due date may need to be modified depending on when the form is corrected and resubmitted.

Please contact your OSP Customer Service Representative with any questions regarding completion of this form.