Instructions for submitting a Proprietary Material Request

Proprietary material requests should be submitted to ERMS no later than Stage 2.

* + Coordinate with the INDOT project manager prior to uploading the request to ERMS. Requests submitted later in the project development process may put the project schedule at risk, should the request not be approved.
  + A template is available for proprietary material requests. See the [Editable Documents webpage](https://www.in.gov/dot/div/contracts/design/dmforms/index.html), under Proprietary Materials.
  + Use the appropriate file description abbreviation. See ERMS File Naming Convention document, [Editable Documents webpage](https://www.in.gov/dot/div/contracts/design/dmforms/index.html), under Design Submittal.
  + Files will be transitioned to Coordinator 7. CO Highway Design coordinates all requests with the appropriate reviewer/approver (bridge, road, traffic).
  + Additional information about proprietary materials is available in *Indiana Design Manual*, Chapter 17

# PROPRIETARY MATERIAL REQUEST

Date:

To:

INDOT Highway Engineering Division Director

INDOT Bridge Engineering Division Director

INDOT Traffic Administration Manager, Traffic Engineering Division

Thru:

Click here to select district Project Manager

From:

DES No:       Route:

Contract No.:       County:

Project Description:

Proprietary Material Name:

## Basis for Proprietary Material Request (select one)

Certification No Suitable Equal Exists

Certification, Essential for Synchronization

Experimental/Research *(work plan required)*

Public Interest Finding (PIF) *(suitable alternatives exist but are not the most cost-effective or in the public’s best interest)*

Programmatic Certification/Programmatic PIF *(work plan required)*

If programmatic, provide the length of time that the approval is effective:

Additional Comments:

## Justification

Complete the items below as applicable. Delete this information, item instructions in brackets [ ], and items that are not applicable prior to submitting the request.

**1. Description of Need**: [Provide a discussion as to why the product was selected, including limitations and conditions for its use.]

**2. Product History**: [Indicate if the product has been used successfully in Indiana or elsewhere.]

**3. Product Availability**: [Indicate if there are other similar products that can be used, and which other similar products were considered. Indicate that there are not at least two other similar products for Certification. A minimum of three vendors’ products are necessary to negate the need for proprietary material approval. Provide discussion or comparison matrix.]

**4. Product Cost**: [Provide the difference in the cost of the proposed item to other non-proprietary items. Indicate the additional cost or cost savings for the use of the proposed item. Include an estimate of additional cost incurred as a result of this proprietary product requirement.]

**5. Project Compatibility**: *(Essential for Synchronization and PIF Only)* [Indicate if this is the only product that is compatible due to function, logistics, or aesthetics. Discuss and document compatibility requirements evaluated. Provide comparisons to other products and their relationship to the product requirements.]

**6. Maintenance**: *(Essential for Synchronization and PIF Only)* [Discuss maintenance issues such as training or storage. Provide discussion as to why other products cannot be used due to maintenance concerns.]

**7. Engineering Analysis**: *(PIF Only)* [Compare the project requirements to similar project types and discuss the reasonableness of the requirements. Discuss unique project factors.]

**8. Expanded Economic Analysis**: *(PIF Only)* [Include life-cycle cost analysis.]

**9. Contractual or Performance Implications**: *(PIF Only)* [Discuss whether use of this item will impose restrictions on the use of other items specified in the contract or in future contracts.]

**10. Attach Supplemental Documentation:** *(PIF Only)* [Outline assumptions, product research, and quantifiable benefits.]

Work plan attached. (*Work plan required for experimental/research and programmatic requests)*

APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

INDOT Highway Engineering Division Director

INDOT Bridge Engineering Division Director

INDOT Traffic Administration Manager, Traffic Engineering Division