# DMVA STANDARD REQUISITION (SR) GUIDE

1. TRACKING NUMBER: Divisional use if they assign internal numbers to track their SRs.

2. REQUEST DATE: Date SR was generated by the division, this field is auto populated.

3. REQUESTING PERSON/DIVISION/CONTACT INFO: Creator of the SR will provide their information, to include email and employee I.D. Number for IRIS.

4. DIVISION UNIT: IRIS unit number, Pick from Drop Down Menu.

5. REQUISITION ACTION REQUESTED: Pick from Drop Down Menu.

6. ESTIMATED AMOUNT: Estimated cost of this purchase. To include all renewal is applicable.

7. NO. OF ATTACHMENTS: List the number of attachments included with your SR.

8. ITEM NO. Input your requested items, one item per line number. Use a second SR if needed.

9. COMM CODE: Enter commodity code, if known.

10. DESCRIPTION: Describe what is being request. Provide detailed information, such a part number, manufacturer number. If request is for services provide the location of the service, type of service, and dates service is requested. For solicitation requests the scope of work, specifications, maps and bid schedule should be attached to this request and annotate the number of attachments in block 7.

11. QTY REQUESTED: Enter one of the following
    a. Number of units to be ordered
    b. Number of contract years to include initial year and renewal options.

12. UNIT: Enter the unit of measure. i.e. Year, Each, Month, Box, etc. If a quote is attached, the unit of measure must match quote.

13. ESTIMATED UNIT PRICE/CONTRACT AMOUNT: Cost per unit. An estimated price if unknown or price must match the attached quotes submitted with this request.

14. ESTIMATED LINE TOTAL: Total cost of line.

15. BILL TO (IRIS CODE): Enter the IRIS Bill To code. This is where you want the invoice(s) sent.

16. SHIP TO (IRIS CODE): Enter the IRIS Ship To code. This is where you want goods delivered.

17. DO NOT EXCEED: Enter the dollar amount this procurement is not to exceed, this must include any and all contract/MA renewal options.

18. GRANT FUNDS USED: Select YES or NO using the drop-down menu. If YES, please include any special requirements outlined in the grant.

19. REQUESTED DELIVERY/START DATE: Delivery date goods are needed by of start of services.

20. ARE FEDERAL FUNDS INVOLVED: Select YES or NO using the drop-down menu. Special requirements must be identified.

21. ACCOUNTING: Must be completed by your certifying officer and include ALL accounting information including Activity code and Object code.

22. REQUESTER: Printed name, signature and date of requester.

23. APPROVAL/CERTIFYING: Printed name, signature and date of your divisions certifying officer.