

The California Prison Industry Authority (CALPIA) Exemption Request Form must be completed and mailed to: Sales Branch, Prison Industry Authority, 1901 Broadway, Suite D, Sacramento, CA 95818. Requests may be faxed to (916) 322-1184. The Sales Branch can be contacted at (916) 323-2419.

This form does not apply to California Department of Corrections and Rehabilitation (CDCR) Facilities or Modular Systems Furniture Orders. CDCR facilities can contact Customer Services at (916) 358-2733 for information. Exemption forms for Modular Systems Furniture can be downloaded from the CALPIA Website at www.pia.ca.gov.

All exemption requests receive a dual review by the appropriate Account Representative and the Sales Manager. If you have any questions, contact your Account Representative at (916) 323-2419. Please note: The Exemption Request Form is not returned to the requesting Agency when completed. A letter notifying your Agency of the outcome of the request will be sent to the Department Contact listed on the form via e-mail whenever possible or FAX.

INSTRUCTIONS FOR COMPLETING A CALPIA EXEMPTION FORM

Requesting Department Information:

- **Department:** Provide the name of the State Department or Agency.
- **Approval required by either a PCO or Designee:** Provide the name of the Procurement and Contracting Officer (PCO) or designee that will be signing under Required Approvals.

Department Contact Information:

- **Contact Name:** Provide the name of the contact person for questions pertaining to the request.
- **Telephone:** Provide the telephone number (including area code) for contact name.
- **E-Mail:** Provide the e-mail address if available for the contact name.
- **FAX:** Provide Fax number (including area code) for the contact name.
- **Street Address:** Provide the street address of the requestor.
- **Mailing Address:** Provide the mailing address if different than the street address.

Note: The letters will be sent via e-mail or fax to the Department Contact listed in this section. E-mail is preferred when possible.

Vendor Information:

- **Vendor Name:** Provide the name of the vendor that will be used if the exemption is approved.
- **Vendor Address:** Provide the address of the vendor, if available.
- **Purchase Order Total \$\$:** Provide the dollar amount of the request. An exemption request **cannot** be processed without a dollar amount.
- **Purchase Order #:** Provide the purchase order number, if known. If no purchase order has been issued, please note "PENDING" or "CALCARD".
- **Quantity for each line item requested:** Provide the number of items for each product being purchased.
- **Requested Delivery Date:** Provide the delivery date required for the items requested.
- **Provide a description of items:** Provide a description of the items to be purchased (i.e. Chairs Item/Stock #4799L, Short Sleeve Shirts Brand X). Please be as specific as possible. Attach additional information as necessary.
- **Justification for Exemption request:** Please provide a detailed explanation as to the reason for your request. Include the reason your Agency needs the product, as well as why CALPIA cannot provide the product, if applicable. Attach additional information as necessary.

Required Approvals:

- **Procurement and Contracting Officer (PCO) or Designee:** This section must be signed.
- **Prison Industry Authority:** This portion will be completed by CALPIA.