**Form Instructions:** This form must accompany all Requests for Proposals (RFPs) being presented to the Division of Procurement Services for approval.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **RFP Coordinator:** |  | | **Office/Division/Program:** | |  |
| **Expected Contract Amount:** | $ | | **Expected Initial Contract Length:** | |  |
| **Expected RFP**  **Release Date:** |  | | **Expected Contract Start Date:** | |  |
| **Type of Services Sought:** |  | | | | |
| **Current Vendor:** |  | | **Current Vendor a Maine Business:** | | Yes  No |
| 1. **Specific Problem or Need**    1. Identify and fully describe the specific requirement or need that the RFP and resulting contract is intended to address and which makes the services necessary.    2. Explain how the requesting Department determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated by Maine statute. | | | | | |
| 1a. | | | | | |
| 1b. | | | | | |
| **2. Past Experience with Purchasing the Services Sought**   * 1. Is this a new service for the requesting Department?   2. If not a new service, have these services been previously solicited via RFP (if so, provide last RFP number)?   3. If these services have been previously solicited via RFP, how many Maine Businesses submitted proposals in response to the last RFP?   4. Was there an appeal request and/or hearing during the previous RFP? | | | | | |
| 2a. | | | | | |
| 2b. | | | | | |
| 2c. | | | | | |
| 2d. | | | | | |
| 1. **Market Research**    1. Describe the market research efforts that have been completed to determine potential qualified vendors.    2. List the names of at least 3 businesses that are qualified and could potentially be interested in providing the services within this RFP. Identify each of those businesses that currently have a presence in Maine (i.e. employ Maine residents). If unable to identify any such business with a Maine presence, please explain why. | | | | | |
| 3a. | | | | | |
| 3b. | | | | | |
| **4. Assistance from Outside Expertise with Requirements**   * 1. Did the requesting Department utilize a consultant/outside expert in the drafting of this RFP?   2. If yes, identify the consultant/outside expert. | | | | | |
| 4a. | | | | | |
| 4b. | | | | | |
| **5. RFP Evaluation Team**   * 1. Identify the members of the evaluation team by name, title and role. Roles should include: lead, financial expert, business expert (preferably from outside the division or program area) and subject matter expert(s).   2. Is the evaluation team familiar with the State’s standard evaluation process?   Note: Guidelines for the evaluation process can be found on the Division of Procurement Services’ FORMS page: <https://www.maine.gov/dafs/bbm/procurementservices/forms> or further training on the evaluation process can be provided by the Division of Procurement Services (upon request).   * 1. Does the Department understand that evaluation documentation must be retained by the Department and that each individual evaluator must take individual notes, in accordance with the State’s purchasing rules: <https://www.maine.gov/dafs/bbm/procurementservices/Policies-Procedures> | | | | | |
| 5a. | | | | | |
| **Name/Title** | | | | **Role** | |
|  | | | | Financial Expert | |
|  | | | | Business Expert | |
|  | | | | Subject Matter Expert | |
|  | | | | Subject Matter Expert (if applicable) | |
|  | | | | Subject Matter Expert (if applicable) | |
|  | | | | (add rows as needed) | |
| 5b. | | | | | |
| 5c. | | | | | |
| **Only RFPs where the resulting contract is expected to meet or exceed $1,000,000 in value require #6 and “Reviewer Signatures” to be completed.** | | | | | |
| **6. Executive Summary for the State Procurement Review Committee (SPRC)**  Please address the following as they relate to this RFP:   1. What is the funding source? 2. Is there performance bond language in the RFP? 3. Provide an explanation of performance standards/requirements/deliverables. | | | | | |
| 6a. | | | | | |
| 6b. | | | | | |
| 6c. | | | | | |
| **Reviewer Signatures** | | | | | |
| **Departmental Legal Counsel:** | |  | | | |
| **Date:** | |  | | | |
| **Commissioner or Departmental Executive:** | |  | | | |
| **Date:** | |  | | | |