



## PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

*INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services intranet site (Forms page) for additional instructions.*

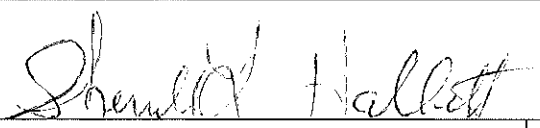
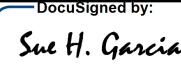
PART I: OVERVIEW				
Department Office/Division/Program:		DVEM/Military Bureau		
Department Contract Administrator or Grant Coordinator:		Sherrill Hallett, Contract Grant Specialist		
(If applicable) Department Reference #:		Bid- 017		
Amount: (Contract/Amendment/Grant)		\$ 8,640.00	Advantage CT / RQS #:	CT15A20191022*1362
<b>CONTRACT</b>	Proposed Start Date:	Click or tap to enter a date.	Proposed End Date:	
<b>AMENDMENT</b>	Original Start Date:	<b>11/4/2019</b>	Effective Date:	1/20/2022
	Previous End Date:	<b>10/31/2022</b>	New End Date:	10/31/2022
<b>GRANT</b>	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Advanced Development Co, LLC		
Brief Description of Goods/Services/Grant:		Plowing and sanding roadway		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	This service is required for operation of Two Maine Army National Guard Facilities Located on North Hildreth Street , Bangor ME
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The vendor selected for the additional service presently holds the contract for the department for the facilities mentioned above.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Given the cost per square yard for existing areas included in the existing contract, the price provided is comparable and is fair and equitable.
4. Describe the plan for future competition for the goods or services.	Future service contracts will be performed utilizing the states established rules for the procurement of goods and services. DVEM will use the RFP competitive bid process

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> No – If No, proceed to Part V.	

PART V: APPROVALS			
The signatures below indicate approval of this procurement request.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Sherrill L. Hallett	Date:	1/20/2022
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	E5DB92AC0F8D490... Sue H. Garcia	Date:	1/25/2022