



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

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:		Maine DOT Region 2 Fleet		
Department Contract Administrator or Grant Coordinator:		Michael Colson		
(If applicable) Department Reference #:		T21-702		
Amount: (Contract/Amendment/Grant)		\$ 5,874.00	Advantage CT / RQS #:	20231218000000000894
CONTRACT	Proposed Start Date:	20 Nov 23	Proposed End Date:	22 Nov 23
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Sullivan tire, Fairfield Me.		
Brief Description of Goods/Services/Grant:		Replace tires on T21-702 a 2012 John Deere loader		

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 type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" 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.

T21-702 Loader had the original tires from 2012 which were worn, and the loader lacked traction in snow or mud. To perform the required services to replace the tires, it would require specialty tools and equipment to perform the services which we don't have. The decision to move forward with the replacement was made consistent with Maine DOT Fleet Management's guidance considering the vehicle's age, mileage, and anticipated replacement schedule. The decision to use a commercial tire facility was made after careful consideration of their availability and expertise needs to get this unit back in service for the winter season.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

Region 2 is down 3 field techs and Fleet Augusta heavy shop is down 4 techs and busy. The vendor for this service has trained tire technicians along with all the special tools for the replacement of heavy equipment tires. The magnitude of this repair was considered, and the logical decision was to send this unit to a tire dealer.

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Sullivan tire is one of the commercial tire vendors we use, and have had work done there in the past. When compared with the other tire vendors their rates were the same. They were able too efficiently and cost effectively do a tire replacement of this significance.

4. Describe the plan for future competition for the goods or services.

In the process of advertising to have more vendors under a Master Agreement for these services.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

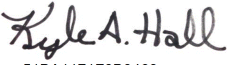
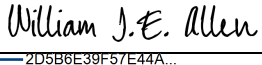
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

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):	<small>DocuSigned by:</small>  <small>51BA1171F8B9463...</small>		
Typed Name:	Kyle Hall, Director Maintenance & Operations	Date:	12/12/2023
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <small>2D5B6E39F57E44A...</small>		
Typed Name:	William J.E. Allen	Date:	1/4/2024