



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:		DACF, Forest Service, Forest Protection	
Department Contract Administrator or Grant Coordinator:		Jennifer Wright	
(If applicable) Department Reference #:			
Contract/Amendment/Grant Amount:	\$ \$23,100.00	RQS #: 01A	20240116000000000980
CONTRACT	Proposed Start Date:	2/1/2024	Proposed End Date: 6/30/2024
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:		Air Rescue Systems Corp. 445 Dead Indian Memorial Rd. Ashland, OR 97520	
Brief Description of Goods/Services/Grant:		Purchase of Secondary Belly Bands for Short Haul Rescues.	

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.

The Forest Protection Division – Aviation Branch, provides Short Haul rescue services throughout the state of Maine, for federal, state, and municipal agencies. The process involves suspending a ranger/rescuer and paramedic below a helicopter on a 100-foot line, to be inserted into remote locations for reasons of extraction of injured people. The injured patient is loaded into a harness or litter, to be lifted out of the remote location and delivered to the next level of care - usually an ambulance or LifeFlight. Additionally, this system can be used to insert forest rangers into remote locations to cut landing zones for helicopters to support fires or other emergencies.

As a safety precaution, the line used for the extraction is connected to the helicopter in two locations. Primarily to the main lifting hook, and as a safety precaution, to the secondary belly band. This allows a second hook to be able to catch the line if the primary hook is accidentally released. This secondary belly band hook also allows the crew to release the line in the event of an emergency, such as a line entanglement in a tree.

This short haul equipment can be installed on two UH-1H and two Bell 407 helicopter, which allows us to cover the state for rescues.

In December of 2023, the company that has provided our secondary belly bands in the past, recalled all their belly bands and is not going to repair or replace them. They are getting out of that part of the business. They have offered us a refund for the equipment. This leaves the Forest Protection Division in need of replacing this equipment before the spring recreation season starts.

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

There are four companies that manufacture secondary systems for short haul. The first makes dual hook systems that semi-permanently attaches to the helicopter and costs over \$70,000.00 per aircraft. Two other companies make bands similar to what we have used in the past, but their weight limits are 500-600 lbs. We need a system that can safely carry at least 800 lbs. The fourth company, Air Rescue Systems (ARS), makes a secondary band that will safely carry 900 lbs. of weight.

The ARS system is also the only band system on the market that is approved by the FAA for Human External Cargo (HEC). As such, the ARS secondary system is the only band system approved by the U.S. Forest service for HEC in National Forests. Given our mission configuration and weight requirements, the ARS secondary belly band system is the only system on that market that we can use.

**PART III: SUPPLEMENTAL INFORMATION**

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

Since this is the only belly band system that we can use and the dual hook system costs over \$280,000 to outfit the fleet, we don't have a choice in comparing prices.

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

There are very few companies that make this type of rescue equipment, so we are limited in what we can purchase for the aircraft that we operate. We will continue to look for other systems in the future, but these bands should last for 10 years.

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

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):	DocuSigned by: <i>Amanda E. Beal</i> 20AF3A2882BB4AA...			1/17/2024
Typed Name:		Date:		
Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> 2D5B6E39F57E44A...			
Typed Name:	william J.E. Allen	Date:	1/30/2024	

NOI 0120240098 01/30/2024 - 02/05/2024