



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:		MaineDOT Region 5	
Department Contract Administrator or Grant Coordinator:		Keith Richards	
(If applicable) Department Reference #:		T21-126	
Amount: (Contract/Amendment/Grant)	\$ 7,483.88	Advantage CT / RQS #:	2024011100000000958
CONTRACT	Proposed Start Date:	11/30/2023	Proposed End Date: 1/5/2024
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:		Beauregard	
Brief Description of Goods/Services/Grant:		Transmission Hydraulic Pump T21-126	

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 mechanic was bringing T21-126 backhoe into the fleet facility for repairs and blew a hydraulic line. Upon repairing hydraulic hose, the park brake was stuck and wouldn't release. The mechanic started troubleshooting the electrical solenoids, fuses, wires, and connectors as these have been the source of the problem in the past. Mechanic reached out to Beauregard technician to see if they could provide a solution. Technician couldn't offer any addition guidance until he inspected the equipment himself. The decision to focus on plow truck repairs and use an experienced vendor to complete this repair was made.

Technicians identify that the charge pump had low pressure. This could have been contributed from when the hose blew, which caused the break failure. The recommendation was to replace the charge pump with a new aftermarket pump. The approval was granted to move forward with repair were made consistent with Maine DOT Fleet Management's guidance considering the vehicle's age, mileage, and the fact this backhoe is not on the replacement schedule. The estimated replacement cost for this vehicle is \$135,000.00 The decision to use a commercial repair facility was made due to the depth of experience needed.

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

The decision to use a commercial repair facility was made due to the depth of experience needed. The vendor for this work has a Case trained tech along with all the special tools to diagnose and fix repairs.

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

Beauregard has been a vendor for Fleet for many years. They keep up to date with training and diagnostic equipment, providing an efficient and reliable service in the area. They are able too efficiently and cost effectively do a repair of this significance.

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

If we could convince more Case dealers and service facilities to move into more locations in the state it would potentially foster better competition.

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.

Procurement Justification Form (PJF)

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Kyle A. Hall</i> 51BA1171F8B9463...		
Typed Name:	Kyle Hall, Director Maintenance & Operations	Date:	1/8/2024
Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> 2D5B0E39F57E44A...		
Typed Name:	william J.E. Allen	Date:	1/30/2024

NOI 0120240108 01/31/2024 - 02/06/2024