



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

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		Bureau of General Services (BGS) Department of Administrative and Financial Services (DAFS)	
Department Contract Administrator or Grant Coordinator:		Crystal Simon	
(If applicable) Department Reference #:		Steam Leak Repair ~ H Building	
Agency Department Code:	18A	Advantage CT / RQS #:	CT 18A 20251124*1234
Amount: (Contract/Amendment/Grant)		\$19,800.00	
CONTRACT	Proposed/Original Start Date:	1/5/2026	Proposed/Most Recent End Date: 2/27/2026
AMENDMENT	New Effective Date:		New End Date (if Applicable):
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		SULLIVAN & MERRITT INC 91 Freedom Park, Hermon, ME 04401 VC1000087379	
Brief Description of Goods/Services/Grant:		Make an emergency repair of a steam leak in the concrete floor of the entrance at Building H at the Dorothea Dix Psychiatric Center in Bangor.	

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 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 checked="" type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice

<input type="checkbox"/>	F. Higher Education Cooperative Project	<input type="checkbox"/>	L. Other Authorization
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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.
	Sullivan and Merritt Corporation is proposing to repair a steam pipe that is leaking in the concrete floor of the entrance at building H. The leak is causing water to come to the surface and soak the carpet. At times when the pressure is high, the water actually spurts out and soaks the sheetrock, which has started to mold and deteriorate and also will need replacing.
2.	Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.
	After speaking with Mechanical Services who is our usual vendor who maintains the heat system in the building, they explained that this is very specialized work and the only vendor they knew in the area was Sullivan and Merritt Corporation. As a result, we reached out to Sullivan and Merrit who agreed to provide a proposal.
3.	Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
	This vendor is very experienced in steam pipe repair, which is a very specialized trade. They provided a price and schedule to complete the work that we feel is fair and reasonable.
4.	Describe the plan for future competition for the goods or services.
	We will continue to follow procurement rules and attempt to obtain three quotes from vendors if the work falls within those guidelines and is not considered an emergency.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/>	Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).
<input type="checkbox"/>	Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.
<input checked="" type="checkbox"/>	No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
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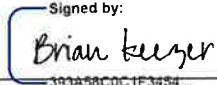
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

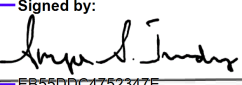
PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 <small>Signed by:</small> <small>393A58C0C1F3454...</small>		
Typed Name:	Brian Keezer, BGS Director	Date:	12/18/2025

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department's Commissioner (or designee):	 <small>Signed by:</small> <small>EB55DDC4752347E...</small>		
Typed Name:	Anya Trundy, Deputy Commissioner, DAFS	Date:	12/29/2025

****OSPS Section Only****

Signature of DAFS Procurement Official:	 <small>Signed by:</small> <small>4C537C52B586437...</small>		
Typed Name:	Sterling Doiron	Date:	1/8/2026

Certificate Of Completion

Envelope Id: 00098A6E-CAF3-4178-A89F-DBF5507FCD3E
 Subject: Complete with Docusign: PJF CT 18A 20251124-1234.pdf
 Source Envelope:
 Document Pages: 3
 Certificate Pages: 1
 AutoNav: Disabled
 Envelopeld Stamping: Disabled
 Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Status: Completed
 Envelope Originator:
 Sterling Doiron
 77 State House Station
 111 Sewall Street
 Augusta, ME 04333
 Sterling.Doiron@maine.gov
 IP Address: 71.169.188.88


Record Tracking

Status: Original
 1/8/2026 8:41:55 AM
 Holder: Sterling Doiron
 Sterling.Doiron@maine.gov
 Location: DocuSign

Signer Events

Sterling Doiron
 Sterling.Doiron@maine.gov
 Sterling Doiron
 Security Level: Email, Account Authentication
 (None)

Signature

Signed by:

 Sterling Doiron
 4C537C52B586437...
 Signature Adoption: Pre-selected Style
 Using IP Address: 71.169.188.88

Timestamp

Sent: 1/8/2026 8:42:02 AM
 Viewed: 1/8/2026 8:42:08 AM
 Signed: 1/8/2026 8:42:30 AM
 Freeform Signing

Electronic Record and Signature Disclosure:
 Not Offered via Docusign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Event	Status	Timestamp
Envelope Sent	Hashed/Encrypted	1/8/2026 8:42:02 AM
Certified Delivered	Security Checked	1/8/2026 8:42:08 AM
Signing Complete	Security Checked	1/8/2026 8:42:30 AM
Completed	Security Checked	1/8/2026 8:42:30 AM

Payment Events

Status

Timestamps