



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:		Maine Judicial Branch, Administrative Office of the Courts	
Department Contract Administrator or Grant Coordinator:		Jeremy Gray	
(If applicable) Department Reference #:			
Agency Department Code:	40A	Advantage CT / RQS #:	20260112*1520
Amount: (Contract/Amendment/Grant)		\$11,500.00	
CONTRACT	Proposed/Original Start Date:	1/12/2026	Proposed/Most Recent End Date: 6/30/2027
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:		Target Electrical Corporation, Gardiner, ME	
Brief Description of Goods/Services/Grant:		Increase electrical capacity at the CJC to avoid main breaker tripping upon startup.	

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

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 Capital Judicial Center (CJC) experienced a catastrophic failure as all elevators attempted to power up causing a 300-amp circuit breaker to trip in the main distribution panel. This created an unsafe condition trapping an individual inside the elevator until technicians could resolve the issue. Subsequently, an electrical meter measuring voltage, current and frequency was installed and monitored for 30-days. Test scenarios were implemented to duplicate the initial failure, thus allowing technicians to arrive at this recommendation. Temporary feeder cables will be installed from generator source to power equipment through the duration of the work.
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.	Target Electric responded to our initial call for emergency response. They were able to resolve the original issue and partnered with the MJB to determine the root cause via the electrical meter. Their knowledge of the infrastructure in the CJC was instrumental in resolving this emergency and their support has been instrumental.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Given the emergency situation the MJB solicited several electricians, yet Target Electrical was the only one able to meet our needs and timeline.
4. Describe the plan for future competition for the goods or services.	This failure was unprecedented and unlikely to occur at this location going forward.

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	
<i>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.</i>	
<input checked="" type="checkbox"/> 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):	DocuSigned by:  755F066F9C634D0...		
Typed Name:	Connor Smith	Date:	1/28/2026

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):	Signed by:  412CA341445E444...		
Typed Name:	Tom Hild	Date:	2/3/2026

****OSPS Section Only****

Signature of DAFS Procurement Official:	DocuSigned by:  7008790FB30A448...		
Typed Name:	Michael McNeil	Date:	2/4/2026