



## 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 DOT/ M&O/ Highway Maintenance Operations		
Department Contract Administrator or Grant Coordinator:	Chad Huggins Transportation Operations Manager		
(If applicable) Department Reference #:			
Agency Department Code:	17A	Advantage CT / RQS #:	MA18P 190514*173
Amount: (Contract/Amendment/Grant)	\$50,000		
<b>CONTRACT</b>	Proposed/Original Start Date:	<b>5/15/2019</b>	Proposed/Most Recent End Date: 4/1/2026
<b>AMENDMENT</b>	New Effective Date:	<b>4/1/2026</b>	New End Date (if Applicable): 4/1/27
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	Laser Line MFG. Inc. Redmond OR. 97756 VC#1000052398		
Brief Description of Goods/Services/Grant:	MDOT Striping Guidance Unit Calibration Service and Repair		

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 checked="" 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. 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.

Laser Line is the sole source producer and manufacture for the Maine DOT Striping Program guidance unit. This is a vehicle mounted laser designator for guidance of the striping trucks, while tracing existing striping patterns or the laydown of new traffic patterns while operating the striping truck and paint system. This request is for the service, repair, calibration, parts, and labor of the GL300P guidance units.

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.

The GLP300P is a complex and unique piece of equipment. The technology and parts are proprietary. Due to the complexity, precision, and proprietary parts of this unit required in the design and operation of this guidance unit, only Laser Line MFG. Inc. technicians are qualified to perform necessary service, repair, and calibration of this unit.

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

Where these units are proprietary to this vendor, the costs are fair and reasonable rather than marked up costs from another vendor even if they could purchase the parts and/ units from the manufacturer.

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

No other State, Local, or Federal agencies can supply parts needed for the GL300P Laser Guidance units. When the GLP300P units become obsolete and can no longer be serviced, a new contract will be advertised for bids through procurement services.

### 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) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

### PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

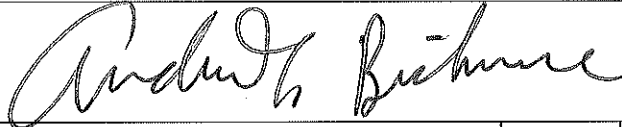
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

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):			
Typed Name:	ANDREW T. BICKMORE	Date:	2/4/2026

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):			
Typed Name:		Date:	

**\*\*OSPS Section Only\*\***

Signature of DAFS Procurement Official:			
Typed Name:	Justin Franzose	Date:	2/4/2026