



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:	Marine Resources, Marine Science		
Department Contract Administrator or Grant Coordinator:	Jarrod Desjardins/HQ Finance		
(If applicable) Department Reference #:	N/A		
Agency Department Code:	13A	Advantage CT / RQS #:	2026010700000001502
Amount: (Contract/Amendment/Grant)	\$10,800		
CONTRACT	Proposed/Original Start Date:	1/5/2026	Proposed/Most Recent End Date: 7/6/2026
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:	Electrical Systems of Maine Auburn, Maine 04210		
Brief Description of Goods/Services/Grant:	Shore power improvements		

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. 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.

The purpose of this contract is to install 2 marine-grade shore power hook ups, needed for the new marine patrol vessel in the DMR West Boothbay Harbor location.

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 vendor ESM is the only electrical vendor capable of providing these services under the particularly challenging circumstances of installation on a dock that will be subject to extreme coastal weather.

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

The prices are comparable to those of similar work done under less specialized circumstances but with the additional premium for said specialized circumstances.

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

Should another vendor become capable of providing these services under the specialized circumstances DMR would put the work out to bid.

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: Erin Summers, Acting Director

Date: 07/01/2026

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:

Signed by:

 0AA4C3C8A6C2460...

Typed Name: Michael Hartmann

Date: 2/12/2026

PJF CT 13A 20260107-1502

Final Audit Report

2026-01-07

Created:	2026-01-07
By:	Mickenzy Breton (mickenzy.breton@maine.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAzDZlb0uh3wU3tbcoaBAQSZJqUxRRhxr

"PJF CT 13A 20260107-1502" History

-  Document created by Mickenzy Breton (mickenzy.breton@maine.gov)
2026-01-07 - 1:43:30 PM GMT
-  Document emailed to Erin Summers (erin.l.summers@maine.gov) for signature
2026-01-07 - 1:43:34 PM GMT
-  Email viewed by Erin Summers (erin.l.summers@maine.gov)
2026-01-07 - 2:53:44 PM GMT
-  Document e-signed by Erin Summers (erin.l.summers@maine.gov)
Signature Date: 2026-01-07 - 2:57:13 PM GMT - Time Source: server
-  Agreement completed.
2026-01-07 - 2:57:13 PM GMT