



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:		Administrative and Financial Services/Maine Revenue Services (MRS)	
Department Contract Administrator or Grant Coordinator:		Lisa Whynot	
(If applicable) Department Reference #:			
Agency Department Code:	18F	Advantage CT / RQS #:	18F 20260122*1588
Amount: (Contract/Amendment/Grant)		\$60,340	
CONTRACT	Proposed/Original Start Date:	<b>2/1/2026</b>	Proposed/Most Recent End Date: 11/30/2026
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:		Woolpert, Inc. d/b/a Data Cloud Solutions Dayton, OH	
Brief Description of Goods/Services/Grant:		Mobile Assessor Software	

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.

<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1.	Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.
	MRS Property Tax Division recently implemented the Vision 8, Computer Assisted Mass Appraisal (CAMA) system. The Property Tax Division is responsible for the assessment and collection of property taxes in the State’s Unorganized Territories (UT). MRS uses the CAMA system to determine the assessed value for all taxable and tax-exempt property, land and buildings in the UT. MRS needs to supplement this system with an integrated and synchronized mobile environment which will assist field appraisers in performing onsite property data verification and correction, new construction data collection, Board of Equalization and appeal related property reviews, and values equalization including scheduled appraisal updates and on-the-fly uniformity assurance efforts.
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.
	Woolpert’s Mobile Assessor Software is the only software of this kind that is supported by the Vision 8 CAMA system. It is essential that the mobile assessing software integrate with the CAMA system since the CAMA system is the system of record for the property tax information in the UT.
3.	Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
	The cost for optional mobile software (not scored) was requested during the CAMA system RFP process. The cost of the Woolpert Mobile Assessor Software is comparable to the costs quoted by the responding vendors.
4.	Describe the plan for future competition for the goods or services.
	MRS will include a mobile software requirement in the future RFP for a CAMA system.

<b>PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS &amp; RECOVERY PLAN (MJRP)</b>	
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.	

No – If No, proceed to Part V.

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

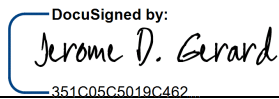
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

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

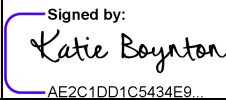
1. The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Jerome D. Gerard	Exec. Director	Date: 2/13/2026

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:	Katie Boynton, Systems Analyst	Date:	2/13/2026