



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

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of 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 Division of Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		DAFS/Procurement Services	
Department Contract Administrator or Grant Coordinator:		Michelle Fournier	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$	Advantage CT / RQS #:	MA 18P 2200215*0066
CONTRACT	Proposed Start Date:	2/16/2022	Proposed End Date: 12/31/2022
AMENDMENT	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Competitive Energy Services, LLC (CES) 148 Middle Street Portland ME 04101	
Brief Description of Goods/Services/Grant:		Energy consulting services	

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. University 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 State of Maine requires professional energy consulting services on all aspects of energy and sustainability initiatives. CES will provide consulting services on various commodities such electricity, natural gas, liquid gas, renewable energy credits, biomass. Departments will have the ability to request consulting services on an as needed basis.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

CES was selected to provide as they are a highly regarded independent advisors who are considered experts in the energy market and is the selected energy advisor to the University of Maine and MDOT.

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

The Master Agreement will establish general hourly rates and categories by position. CES will offer a fee structure that is most appropriate for each specific scope of work requested and CES will negotiate a scope of services fee structure directly with each agency. CES offered a blended not to exceed rate as well.

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

The Department will RFP this service during 2022.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

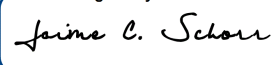
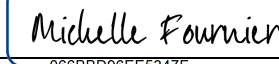
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	<small>DocuSigned by:</small>  <small>6D6437754DD0459...</small>		
Typed Name:	Jaime C. Schorr	Date:	2/18/2022
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <small>066BBDD96EE5347F...</small>		
Typed Name:	Michelle Fournier	Date:	3/4/2022

