



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:	Office of Court Facilities, Judicial Branch		
Department Contract Administrator or Grant Coordinator:	Dylan Hanscom, Facilities Engineer		
(If applicable) Department Reference #:	Emergency Elevator repairs at the Biddeford District Court		
Amount: (Contract/Amendment/Grant)	\$ 8,800.00	Advantage CT / RQS #:	20230221*1005
CONTRACT	Proposed Start Date:	2/8/2023	Proposed End Date: 3/31/2023
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:	TK Elevator Corporation 295 University Avenue Westwood, MA 02090		
Brief Description of Goods/Services/Grant:	The provider replaced and converted the holding tank valve due to obsolete or modernization.		

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. 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.	TK Elevator agrees to provide the labor and materials to replace the valve on the Elevator (EL35397). TK Elevator will secure the elevator, remove the oil from the tank unit, remove the old valve, install the new valve, add oil back into the machine, make adjustments to the valve, monitor elevator, and return to service.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The public elevator (EL35397) at the Biddeford District Court reported a malfunction which left it inoperable in early December 2022. TK Elevator maintains the preventative maintenance for both ThyssenKrupp elevators at the Biddeford District Court.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The negotiated cost for replacing an obsolete valve in the public hydraulic passenger elevator is reasonable and fair and will be essential for public access.
4. Describe the plan for future competition for the goods or services.	The plan for goods and services will be the competitively bidding process, which is available to the public.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> 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):	DocuSigned by: <i>Dennis Corliss</i> 2/27/2023
Typed Name:	Dennis Corliss Date: 2/27/2023
Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> 3/3/2023
Typed Name:	Click or tap here to enter text. Date: 3/3/2023

William J.E. Allen

NOI 0320230209 03/03/2023 - 03/09/2023