



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.

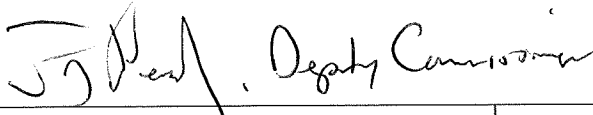
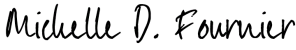
PART I: OVERVIEW			
Department Office/Division/Program:		Inland Fisheries & Wildlife, Bureau of Warden Service	
Department Contract Administrator or Grant Coordinator:		Denise Brann	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 9,785.29	Advantage RQS #:	09A-20230217*1003
CONTRACT	Proposed Start Date:	2/17/2023	Proposed End Date: 3/15/2023
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:		Ascent Aviation Group, Inc, Parish, NY	
Brief Description of Goods/Services/Grant:		2049 gallons of aviation gasoline	

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 Maine Warden Service has 4 aircraft that need aviation gasoline.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	There are not any other AVGAS distributors that deliver up in Central and Northern Maine.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	MWS has used this vendor and they are able to provide discounted price when we split a tanker load with another business (Fletcher Aviation, Greenville Municipal Airport) that also receives Avgas in the area.
4. Describe the plan for future competition for the goods or services.	To date, this is the only vendor willing to deliver a load of AVGAS to both Greenville and Northern Maine.

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 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):			
Typed Name:	Timothy Peabody	Date:	2/17/2023
Signature of DAFS Procurement Official:			
Typed Name:	Michelle D. Fournier	Date:	3/6/2023