



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:		Corrections	
Department Contract Administrator or Grant Coordinator:		Conner McFarland	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 8,414.28	Advantage CT / RQS #:	
CONTRACT	Proposed Start Date:	3/10/2023	Proposed End Date: 3/24/2023
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:		Messer Truck Equipment Westbrook, Maine	
Brief Description of Goods/Services/Grant:		Replacement of snowplow assembly and hopper.	

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 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.

Maine Correctional Center needs to replace a snowplow and assembly, as well as a soil hopper, which recently became unusable unexpectedly. The purchase of a new snowplow and assembly, as well as a new soil hopper, is essential for the continued operation of the facility. The unexpected breakdown of our current equipment will limit our ability to keep walkways, parking lots, and access roads clear through the rest of the season.

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

The vendor has previously provided Maine Correctional Center with similar products which have met quality expectations. They have the required parts on hand and are able to complete the installation immediately.

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

The costs of the replacement are consistent with other similar replacements within the last two years.

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

Maine Correctional Center will use the competitive bid process when it has identified aging or hard to maintain equipment.

### 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):

DocuSigned by:  
*Anthony Cantillo*  
8E48CAE00CCD407...

Typed Name:

Anthony Cantillo

Date:

3/10/2023

Signature of DAFS  
Procurement Official:

DocuSigned by:  
*Michelle Fournier*  
066BBD96EE5347F...

**Procurement Justification Form (PJF)**

Typed Name:	Michelle Fournier	Date:	3/16/2023
-------------	-------------------	-------	-----------