



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:		Maine Correctional Center	
Department Contract Administrator or Grant Coordinator:		Karen Yeaton, Deputy Warden	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$7,154.64	Advantage CT / RQS #:	03A 20240226*1208
CONTRACT	Proposed Start Date:	12/27/2023	Proposed End Date: 1/16/2024
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:		Johnson Controls Westbrook, ME	
Brief Description of Goods/Services/Grant:		Repairs of fire panel in Dorm 5 at MCC	

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 fire panel which controls the sprinklers and alarms for Dorm 5 at MCC was damaged by water at the facility. The fire panel required replacement parts due to the damage. The system required immediate attention due to it's critical life safety functions for the building.

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

Johnson Controls is currently contracted to maintain and inspect the fire alarm and suppression systems under CT # 03A 20240130*2112. The vendor is uniquely familiar with our fire suppression and alarm systems and has conducted the maintenance of these systems for over ten years. The Department is satisfied with the vendor's work on these systems to date.

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

The costs have been determined to be fair and reasonable based on market rate for the equipment and labor. The costs for labor are outlined in the above mentioned contract for repairs.

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

The Department will continue to use the competitive process for these services.

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – 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); PURCHASES BY THE STATE

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?

Yes, the requesting Department signatory understands and acknowledges [Title 17, Chapter 101, §3104](#).

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Conner McFarland</i> FD522942914A4F8...		
Typed Name:	Conner McFarland	Date:	2/26/2024
Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> 2D5B0E39F57E44A...		
Typed Name:	William J.E. Allen	Date:	3/7/2024

NOI 0320240261