



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:		MDIFW – Wildlife Management	
Department Contract Administrator or Grant Coordinator:		Flora Drury, Land Acquisitions and Grants Biologist	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 7,000.00	Advantage CT / RQS #:	09A-20240318000000002521
CONTRACT	Proposed Start Date:	3/19/2024	Proposed End Date: 6/14/2024
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:		Plisga & Day, Belfast ME	
Brief Description of Goods/Services/Grant:		Boundary survey, legal description, and boundary marking of lots 18 and 18-1 on Tax Map 11 in the Town of Prospect, and to survey, mark, and develop a legal description for the portion of these lots to be sold to DIFW.	

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 checked="" 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 Department has a purchase and sale agreement with a landowner in Prospect to acquire a portion of her two contiguous lots. The Department intends to acquire approximately 14 acres of land on the Penobscot River and adjacent to the Bowden Point parcel that the Department acquired last year. The survey will establish a new internal boundary line between the portion of the two parcels that the Department will acquire and the lot the owner will retain.

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

The vendor did the survey for the Department's acquisition of the abutting Bowden Point property last year. In addition, he has previously done a survey for these parcels, although his client at the time did not want a plan drawn and did not want to resolve the title issues discovered in the survey process. Hiring this surveyor will take advantage of the title research he has already done for the property and his knowledge of the site.

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

The quote for the survey is similar to or lower than the cost of surveys for similarly sized lots.

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

The Department will continue to solicit quotes for surveys from three or more providers in order to select the provider who can deliver the survey in the required timeframe for the lowest price.

### 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:  
*Judith A Camuso*  
2E11918D8425475...

Typed Name: Judy Camuso

Date: 3/18/2024

Signature of DAFS  
Procurement Official:

DocuSigned by:  
*Martha Verhille*  
891CE7A1493D45B...

Typed Name: Martha Verhille

Date: 3/26/2024