



### PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.*

PART I: OVERVIEW				
Department Office/Division/Program:		Commissioner's Office/ Division of Facilities Management		
Department Contract Administrator or Grant Coordinator:		Chris Moiles / Melinda Farrell		
(If applicable) Department Reference #:		COM-26-0220		
Agency Department Code:	10A	Advantage CT / RQS #:	RQS 10A 20260226000000001348	
Amount: (Contract/Amendment/Grant)		\$21,160.00		
CONTRACT	Proposed/Original Start Date:	2/26/2026	Proposed/Most Recent End Date:	6/30/2026
AMENDMENT	New Effective Date:		New End Date (if Applicable):	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Johnson & Jordan, Inc. Scarborough ME		
Brief Description of Goods/Services/Grant:		To supply labor and electrical materials to upgrade the security/access system at the DHHS Caribou Office		

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. Higher Education 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 Caribou DHHS Office currently utilizes the BRIVO security/access system. Effective 2/28/2026, the motherboard for the system will no longer be supported and is considered "end of life". As the BRIVO system is not compatible with the State's Honeywell system, and the other BRIVO components are outdated and in need of upgrading, we must now transition to the Honeywell system and upgrade the components.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

The State has a Master Agreement with Honeywell. DHHS reached out to Honeywell to provide the quote and perform the services, but they indicated that due to staffing issues and the distance to the job site, they are unable to perform the work. BGS's Building Control Center recommended Johnson & Jordan as they are a known vendor with expertise in this type and scope of work, and they are willing and able to perform the work. No other vendors have the expertise and availability to complete this work by the stated deadline.

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

Based on current and prior knowledge of similar work, the rates that are being charged are considered fair and reasonable. Klein Electric is currently doing a similar project in Caribou, and their cost is comparable (\$23,000 +/-). There are limited contractors with the skill set to perform the work.

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

For future projects, DHHS will reach out to vendors with Master Agreements.

### 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) or (026) – 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); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).


The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their

knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

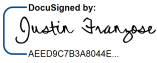
**PART VI: APPROVALS**

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Jeanne Garza	Date:	03/17/2026
2. Additional signature required <b>ONLY if box E (Emergency) is selected in PART II</b> . The signature below indicates approval by the Department's Commissioner, or the <u>designee specifically authorized to approve emergency procurement requests</u> .			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

**\*\*OSPS Section Only\*\***

Signature of DAFS Procurement Official:			
Typed Name:	Justin Franzose	Date:	3/17/2026