



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.*

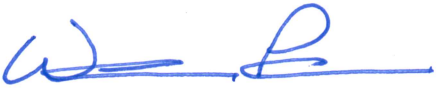
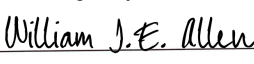
PART I: OVERVIEW			
Department Office/Division/Program:		MaineDOT, Project Development, Materials Testing & Exploration	
Department Contract Administrator or Grant Coordinator:		James Ryan Robinson, Laboratory Testing Engineer	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ \$6345	Advantage CT / RQS #:	2023032400000001183
CONTRACT	Proposed Start Date:	3/27/2023	Proposed End Date: 3/27/2024
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:		Instrotek Inc. Raleigh, NC	
Brief Description of Goods/Services/Grant:		Service Agreement with Instrotek for calibration and preventative maintenance of MaineDOT Instrotek Equipment	

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.	This service contract will provide onsite calibration and service of several pieces of test equipment manufactured by InstroTek, Inc. This test equipment is used to verify asphalt mixtures used in highway construction. Asphalt mixtures are a major component of our program and MaineDOT invests millions of dollars each year period to ensure accuracy of results and to maintain required laboratory accreditation, it is necessary for this equipment to be properly maintained and calibrated.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The service and calibration of this equipment is proprietary to the manufacturer and no other vendor would be qualified to make repairs or adjustments to this equipment. Not only is the physical equipment unique to the manufacturer, but the software used to operate the device and capture test data is also proprietary.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The cost of this service agreement is comparable to the cost of agreements we have had with other vendors for similar laboratory testing equipment.
4. Describe the plan for future competition for the goods or services.	The MaineDOT laboratory works with a variety of vendors for equipment calibration services and has changed working relationships as required based upon performance, customer service and cost. Because this equipment is often proprietary, the vendors available to perform the service and calibration are extremely limited and not much can be done on our part to foster competition. Previously we were able to acquire this service through a master agreement with Remi, a 3rd party administrator, but that agreement was allowed to expire.

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 checked="" 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:	William Pulver, C.O.O.	Date:	3-20-2023
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	William J.E. Allen	Date:	4/5/2023