



## 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:	Department of Public Safety		
Department Contract Administrator or Grant Coordinator:	Lt. Randall Keaten Starla Dorval		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 7,140.00	Advantage CT / RQS #:	CT-16A20210423*2925
<b>CONTRACT</b>	Proposed Start Date:		Proposed End Date:
<b>AMENDMENT</b>	Original Start Date:	<b>5/1/2021</b>	Effective Date:
	Previous End Date:	<b>11/30/2022</b>	New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	Arrowhead Landscape Company, LLC Windham, ME 04062		
Brief Description of Goods/Services/Grant:	Lawn care and landscaping services		

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 checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input 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.

Maine State Police Troop B does not have the required personnel to perform lawn care services in-house.

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

The vendor was chosen using a competitive process to award the original contract.

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

Arrowhead Landscape Company was the lowest bidder for the original contract.

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

This is the last available renewal for this CT. Once contract terms have expired, this service will be put out to bid per State of Maine regulations

### 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):



Michael Sauschuck (Apr 5, 2023 10:31 EDT)

Typed Name:

Michael Sauschuck

Date:

Apr 5, 2023

Signature of DAFS  
Procurement Official:

DocuSigned by:  
Kathy Paquette

4102BA30FAF44ED...

Typed Name:

kathy Paquette

Date:

4/11/2023






# PJF Arrowhead 2023

Final Audit Report

2023-04-05

Created:	2023-04-05
By:	Starla R Dorval (Starla.R.Dorval@maine.gov)
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