



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:		Secretary of State, Bureau of Motor Vehicles	
Department Contract Administrator or Grant Coordinator:		Catherine Curtis, Deputy Secretary of State	
(If applicable) Department Reference #:		n/a	
Amount: (Contract/Amendment/Grant)		\$ 319,079.61	Advantage CT / RQS #: 20210120000000002077
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	2/1/2021	Effective Date:
	Previous End Date:	6/30/2023	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		ACF Technologies 64 Peachtree Road, Suite 201 Asheville, NC 28803	
Brief Description of Goods/Services/Grant:		Lobby management hardware and software	

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.

Our current ticket kiosks at the branches are at the end of their shelf life and need to be replaced. The software has been upgraded since the last time we purchased the old kiosks, and we need new ones that work with our current software. The current kiosks are not ADA compliant, and the new ones are going to be ADA compliant. We are including LCD screens that will be installed above the windows, so we meet ADA requirements.

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

We use Q-Flow as the software for our lobby management and appointment system. ACF is the only reseller for this software in the US, and they are the sole source of the customizations needed for how the Bureau of Motor Vehicles needs this type of service to work. We have a current contract in place CT # 20210120000000002077.

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

Due to how the whole system is set up and based on our past experience with this type of equipment the cost is fair and reasonable

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

Competitive bidding opportunities will be sought within the next 5 years.

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); CONTRACT WITH THE STATE

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

Yes, the requesting Department understands and acknowledges MRS Title 5, §18-A, 2.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	<i>David Lachance</i>		
Typed Name:	David Lachance	Date:	<i>3/27/24</i>
Signature of DAFS Procurement Official:	DocuSigned by: <i>Joseph Zrioka</i> EA813178102243C...		
Typed Name:	Joseph zrioka Director of IT Procurement	Date:	4/5/2024