



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE 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 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:		Maine Judicial Branch	
Department Contract Administrator or Grant Coordinator:		Jeremy Gray	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 6,290.00	Advantage CT / RQS #:	20250402*1414
CONTRACT	Proposed Start Date:	1/13/2025	Proposed End Date: 3/31/2025
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:		Portland Glass-Biddeford 150 Alfred St, Biddeford, ME 04005	
Brief Description of Goods/Services/Grant:		Replace broken pane of glass in 1 st floor public lobby.	

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 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 checked="" 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.	An interior pane of glass in the first-floor public lobby broke. The location created a safety risk and needed immediate replacement.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	Portland Glass was able to respond immediately and install on our terms eliminating downtime for the courthouse.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Emergency repair work that is required to keep the courthouse safe, secure and operational are offered to the bidder who can meet the scope and timelines demanded by the MJB.
4. Describe the plan for future competition for the goods or services.	Emergency repairs will be dealt with similarly going forward. When circumstances allow, a more traditional competitive bidding process will be used to identify the best value for the MJB.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> The requesting department signatory understands and acknowledges Maine’s Conflict of Interest statutes.	

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Connor Smith</i> 755F066F9C634D0...		
Typed Name:	Connor Smith	Date:	4/2/2025
Signature of DAFS Procurement Official:	DocuSigned by: <i>Martha Verhille</i> 891CE7A1493D45B...		
Typed Name:	Martha verhille	Date:	4/17/2025