



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:		Judicial Marshal Office	
Department Contract Administrator or Grant Coordinator:		Ted Ross - Marshal	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 16, 317.98	Advantage CT / RQS #:	rqs 20220428*1262
CONTRACT AMENDMENT GRANT	Proposed Start Date:		Proposed End Date:
	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Cincinnati Time of Maine, 79A Bradley Drive, Westbrook, Maine 04092	
Brief Description of Goods/Services/Grant:		Upgrade current DVR System and Enhance the Security Surveillance System @ Presque Isle DC	

## 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.

Due to a recent incident culminating in significant exterior property damage, portions (DVR System) of the current Surveillance System were found to be antique. It was also determined that there was/is restricted and/or minimal to no camera surveillance coverage regarding various exterior area(s) of the premise. It is the goal to upgrade the current system and improve upon and establish more appropriate coverage to additional areas of the court area.

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

This vendor is servicing the current system and all systems throughout the State. They are also installing the new system at the YJC, which required a statewide system upgrade for inoperability capability that they will also maintain. The vendor was originally selected as a sole source vendor due to lack of competition to service the State.

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

These rates are fair and reasonable due to a quote being provided (attached) which is an industry standard we see typically when requesting quotes for similar items and installation. The primary costs are for the equipment, not labor. Funding was utilized through current budget monies reallocated.

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

With competition limited to vendors many miles away and the inability to provide statewide service, it is unknown at this time what viable vendors will be available in the future.

### PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

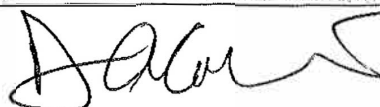
Yes – If Yes, please attach the approved Business Case(s).

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):



## Procurement Justification Form (PJF)

Typed Name:	Dennis A. Carliss	Date:	4/26/22
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> Joseph Zrioka <small>EA013178102243C...</small>		
Typed Name:	Joseph Zrioka	Date:	5/5/2022