



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:		DEP/BWQ/DEA/Aquatic Toxicology	
Department Contract Administrator or Grant Coordinator:		Tom Danielson	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 28,073.55	Advantage CT / RQS #:	06A 20220504*1290
CONTRACT	Proposed Start Date:		Proposed End Date:
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:		Alumacraft Escape 165 boat package from Hamlin's Marine	
Brief Description of Goods/Services/Grant:		16' Alumacraft Escape 165 boat, 40 HP outboard motor, galvanized roller trailer	

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.

PART III: SUPPLEMENTAL INFORMATION

The DEP Aquatic Toxicology Unit needs a boat that is equipped to accommodate our work needs. A boat approximately 16' in length, with a wide beam, moderate draft, side console, and open deck is ideal for our purposes.

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

Purchasing a boat is proving to be a challenge as the pandemic has resulted in a high-demand for boats/motor/trailer packages. Four vendors were visited. We evaluated 8 models and received quotes for 5 of them from 3 vendors. The two boats that fit our budget were the Alumacraft Escape and G3 Guide from Hamlin's Marine. We selected the Alumacraft Escape because of its design features and console steering.

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

Hamlin's Marine can supply the Alumacraft Escape, which will fit our needs and budget. We looked at 7 others and received quotes for four of these.

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

We utilized a plan by looking at different models from more than one vendor, to determine which boat to purchase. We would do the same 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):			
Typed Name:	Melanie Loyzim	Date:	May 17, 2022
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	2D5B0E39F57E44A... William J.E. Allen	Date:	5/25/2022

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