



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:		Agriculture/Conservation/Forestry - Aircraft	
Department Contract Administrator or Grant Coordinator:		Jenny Stevens	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ variable over life of Master Agreement	Advantage CT / RQS #:	MA-18P150916*48
CONTRACT	Proposed Start Date:	06/23/2022	Proposed End Date: 6/30/2024
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:		General Services Administration (GSA) P.O. Box 979020 St. Louis, MO 63197	
Brief Description of Goods/Services/Grant:		Aircraft Parts	

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.

The Maine Forest Service operates aircrafts for fighting fires and GSA allows us to get certain aircraft parts and equipment in bulk amounts at lower prices than other resources, and are the only place that can offer these type of services needed.

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

The Department of Agriculture, Conservation and Forestry has no resource of aircraft parts and has to bid out for it. With GSA it is priced at competitive low prices and certain parts can only be found through them.

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

As noted above in Section 3, GSA aircraft parts is repeatedly lower, along with repeated attempts to bid this out with no results. The Department of Agriculture, Conservation and Forestry has determined that GSA pricing is fair and reasonable, given the comparisons to the commercial market.

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

The Department of Agriculture, Conservation and Forestry will continue to periodically monitor the commercial marketplace for any vendors that can match the reasonability of GSA's pricing and availability.

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):

DocuSigned by:

Amanda E. Beal

Typed Name:

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Amanda E. Beal

Date:

5/17/2022

Signature of DAFS
Procurement Official:

DocuSigned by:

Jaime C. Schorr

Typed Name:

6D6437754DD0459...
Jaime C. Schorr

Date:

5/27/2022