



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, Information Services		
Department Contract Administrator or Grant Coordinator:	Chris Johnson, Deputy Secretary of State Chief Information Officer		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$22,620.00	Advantage CT / RQS #:	20230511000000001383
CONTRACT	Proposed Start Date:	7/1/2023	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:	The Atlas Group, LLC DBA: Technology Solutions of Maine 177 Village Rd Smithfield, ME 04978		
Brief Description of Goods/Services/Grant:	Cleaning and general light maintenance of Kodak scanners		

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 Department of the Secretary of State has 26 Kodak scanners that require frequent cleaning due to their extremely high usage by the Bureau of Motor Vehicles and the Maine State Archives.

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

The Department currently uses this vendor and they are the preferred choice as they are local and can perform services regularly and respond quickly when non-routine service is required.

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

The cost of the bi-weekly cleanings of the Kodak scanners is reasonable. The formal bid was originally awarded to Technologies Unlimited who were bought out by Technology Solutions of Maine.

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

The Office of Information Services is open to the competitive bid process if another vendor can satisfactorily meet the needs of Information Services with respect to supported needs, technology expertise, price and the required service timeframe.

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


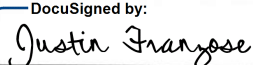
Does this request utilize ARPA/MJRP funds?

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:	Christopher K. Johnson	Date:	5/11/2023
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	JUSTIN FRANZOISE <small>AEEED9C7B3A8044E</small>	Date:	5/15/2023