



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 Branch/ Facilities	
Department Contract Administrator or Grant Coordinator:		Kevin Fogg	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 15,669.30	Advantage CT / RQS #:	20240508*1596
CONTRACT	Proposed Start Date:	4/1/2024	Proposed End Date: 5/1/2024
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:		MREM Bangor, ME	
Brief Description of Goods/Services/Grant:		Building/Management	

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.

Needed building management coverage at two Courthouses while new RFP was being completed, this service could not be allowed to lapse.

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

Building Management is a service that cannot be allowed to lapse. It was critical to operations to have this service in place while new RFP was being completed. The vendor that had the service under old RFP's had won the new bidding, so there was no change needed in the vendor to cover service needed.

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

The rate remained the same as the expired RFP's, no increase in cost was absorbed.

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

Future building management adheres to the RFP so the B/M may perform duties required.

### 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:  
*Connor Smith*  
755F066F9C634D0...

Typed Name: Connor Smith

Date: 5/8/2024

Signature of DAFS  
Procurement Official:

DocuSigned by:  
*William J.E. Allen*  
2D5B6E39F57E44A...

Typed Name: William J.E. Allen

Date: 5/10/2024

