



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:	Marine Resources/Marine Science/Education Division			
Department Contract Administrator or Grant Coordinator:	Dottie Yunger/HQ-Finance			
(If applicable) Department Reference #:	N/A			
Amount: (Contract/Amendment/Grant)	\$ 6,000.00	Advantage <u>CT</u> / RQS #:	13A	20240418000000002885
CONTRACT	Proposed Start Date:	5/1/2024	Proposed End Date:	11/15/2024
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:	Boothbay Region YMCA 261 Townsend Ave PO Box 500 Boothbay Harbor ME 04538			
Brief Description of Goods/Services/Grant:	Provide housing accommodations for Maine State Aquarium seasonal staff			

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 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.

The Department has received emergency supplemental funds to expedite repairs to the Maine State Aquarium (MSA) to facilitate opening in Summer 2024. Without the required repairs, the Department will not be able to open to the public in a safe and informative manner. The MSA was closed in 2020 as a result of the COVID 19 pandemic. Attempts to reopen in 2022 and 2023 were made, several significant issues impacting visitor safety, animal health and wellbeing, and facility integrity were identified. The MSA serves as a regional draw for Lincoln County and the Boothbay Harbor Region, with 30,000 visitors prior to the pandemic. Seasonal staff have been hired to reopen the Aquarium and need convenient, affordable, local housing.

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

Boothbay Region YMCA owns a residence in Boothbay that provides parking, private bedrooms, kitchen, living space, and laundry. The space is rented to individuals and groups in need of local affordable housing, of which there is not much in Boothbay especially during the summer season. There is no other vendor providing such housing in the Boothbay area.

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

Boothbay Region YMCA is leasing the space below market value.

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

Boothbay Region YMCA is the sole provider of below market value housing of this kind in the Boothbay area. There are no other providers with a house below market rate that includes individual rooms, full kitchen, parking, laundry, and living room.

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):	 <u>Meredith Mendelson (Apr 18, 2024 18:50 EDT)</u>		
Typed Name:	Meredith Mendelson, Deputy Commissioner of DMR	Date:	4/18/24
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <small>891CE7A1493D45B...</small>		
Typed Name:	Martha verhille	Date:	5/10/2024

PJF- CT 13A 20240418-2885

Final Audit Report

2024-04-18

Created:	2024-04-18
By:	Amanda Webb (amanda.webb@maine.gov)
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-  Document created by Amanda Webb (amanda.webb@maine.gov)
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