



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:		MaineDOT Region 5	
Department Contract Administrator or Grant Coordinator:		Keith Richards	
(If applicable) Department Reference #:		T01-203	
Amount: (Contract/Amendment/Grant)		\$ 11,990.98	Advantage CT / RQS #: 20240516000000001638
CONTRACT	Proposed Start Date:	4/1/2024	Proposed End Date: 6/1/2024
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:		Bangor Truck and Trailer, Inc 2245 Odin Road, Hermon Me 04401	
Brief Description of Goods/Services/Grant:		Replacement of cam shaft	

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 driver indicated to the mechanic a lack of power and the engine wasn't operating as normal. The mechanic removed the valve cover and noticed that one of the cylinders rocker arms was not functioning up and down like the others. The inspection indicated internal damage to a cam lobe, concluded from previous experience. The decision to send the repairs to a commercial vendor was made due to our concern of potential metal filings in the oil. The dealer tech confirmed the bad cam lobe with the engine oil having evidence of metal fillings. On further investigation, the filter elements showed no filing past the primary filter.

The decision to move forward with the cam replacement was made consistent with Maine DOT Fleet Management's guidance considering the vehicle's age, mileage, and the fact this truck is not on the replacement schedule. The estimated replacement cost for this vehicle is \$200,261.80.

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

The decision to use a commercial repair facility was made due to the depth of experience needed. The vendor for this work has a Volvo trained tech along with all the special tools to diagnose and fix repairs.

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

Bangor Truck & Tractor Sales, Inc. have been a vendor for Fleet for many years. They keep up to date with training and diagnostic equipment, providing an efficient and reliable service in the area. They are able too efficiently and cost effectively do a repair of this significance.

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

If we could convince more Volvo truck dealers and service facilities to move into more locations in the state it would potentially foster better competition.

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); PURCHASES BY THE STATE

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?

Yes, the requesting Department signatory understands and acknowledges [Title 17, Chapter 101, §3104](#).

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Kyle A. Hall</i> 51BA1171F8B9463...		
Typed Name:	Kyle Hall, Director Maintenance & Operations	Date:	5/14/2024
Signature of DAFS Procurement Official:	DocuSigned by: <i>Michael McNeil</i> 7008796FB36A449...		
Typed Name:	Michael McNeil	Date:	5/22/2024

NOI 0520240587