



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		DEP/BWQ/DEA/Aquatic Invasive Species Program		
Department Contract Administrator or Grant Coordinator:		John McPhedran		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 500,000 (Amendment)	Advantage CT / RQS #:	06A 20220425*2603
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	5/9/2022	Effective Date:	12/31/2025
	Previous End Date:	12/31/2025	New End Date:	12/31/2027
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Solitude Lake Management, 590 Lake Street, Shrewsbury, MA 01545		
Brief Description of Goods/Services/Grant:		Planning and executing herbicide applications to manage aquatic invasive plants		

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 purpose of this Contract is to support the Department's charge to prevent the spread of invasive aquatic plants and manage existing infestations where feasible (38 MRS §410-N). The service provided in this contract is critical for reducing spread of invasive aquatic plants throughout Maine. This contract is being executed to meet the Department's treatment needs for plant management using herbicides. The primary reason for the Department's herbicide treatments is to respond quickly to new infestations to prevent plants from becoming widespread in a particular waterbody and reduce the risk of the plant spreading to other waters.

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

The Department has issued an RFP for this service in the past and received only one proposal, i.e., from this vendor. This contractor is the only one with the equipment, expertise and experience to perform herbicide treatments envisioned for Maine lakes. The equipment needed includes airboats to access shallow water without disturbing the lake bottom, differential GPS transceivers and metering devices to ensure that the correct amount of product is applied to a water body. Licensed and experienced personnel are also critical to success of an herbicide treatment. Given the understandable scrutiny paid to such treatments, a professional, capable and experienced applicator is an absolute must and is what we have in this Provider.

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

Department staff attend the annual Northeast Aquatic Plant Management Society meeting where we talk with herbicide applicators who work in other parts of the Northeast U.S. From these discussions, we have concluded that the costs charged by the proposed contractor are on par within industry standards. In addition, the Department's experience using this contractor for multiple treatment projects in Maine is that the annual costs and increases are reasonable.

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

Department staff communicate biannually with colleagues from other states and herbicide applicator industry representatives at meetings of the Northeast Aquatic Nuisance Species Panel and the Northeast Aquatic Plant Management Society. These exchanges provide opportunities to ask about other herbicide applicators with the capacity to conduct the treatments in Maine lakes. Department staff can also learn of potential applicators in future discussions with Board of Pesticides Control staff. The Department will continue to inquire about other potential applicators but, for the time being, the Provider in this contract is solely qualified to conduct these projects for the State of Maine.

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); CONTRACT WITH THE STATE***Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).*☒ The requesting department signatory understands and acknowledges Maine's Conflict of Interest statutes.**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

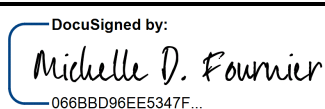
Signature of requesting
Department's Commissioner
(or designee):

Typed Name:

Melanie Loyzim, Commissioner

Date:

04/22/2025

Signature of DAFS
Procurement Official:DocuSigned by:

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Typed Name:

Michelle D. Fournier

Date:

5/5/2025