



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 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:		Department of Transportation	
Department Contract Administrator or Grant Coordinator:		MaineDOT CA: Edward J Dupont MaineDOT CS: Robert L Dwyer MaineIT IT Contact: Jonathan Ives	
(If applicable) Department Reference #:		47830	
Agency Department Code:	17A	Advantage CT / RQS #:	20250303000000002014
Amount: (Contract/Amendment/Grant)		\$35,910	
CONTRACT	Proposed/Original Start Date:	4/1/2025	Proposed/Most Recent End Date: 3/31/2026
AMENDMENT	New Effective Date:	4/1/2026	New End Date (if Applicable): 12/31/2026
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Helm Operations Software, Inc., Victoria, BC, Canada	
Brief Description of Goods/Services/Grant:		Ferry crew scheduling and inventory tracking SaaS	

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 checked="" 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. Higher Education Cooperative Project	<input type="checkbox"/>	L. Other Authorization
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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.

Maine State Ferry Service (MSFS) operates three (3) mainland terminals servicing six (6) islands year round. Preparations for the travelling high season begins in late May and runs into October. MSFS needs a better way to schedule crew and track inventory.

In 2025, MSFS initiated a pilot of the HelmConnect Software as a Service (SaaS) to assist with crew scheduling and inventory.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

The Helm CONNECT pilot began in April 2025 as a sole source agreement. The implementation and training took longer to accomplish than was anticipated at the time of procurement. By the time setup and training were completed, MSFS was in the high season and unable to realize the full potential of Helm CONNECT under real operating conditions. Limited testing of the pilot was performed prior to the end of the high season. In order to fully assess the pilot, MSFS needs to use Helm CONNECT through an entire season. This amendment will extend the pilot through the full 2026 season.

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

Pricing aligns with the negotiated pricing for the first year of the pilot program and covers the same services for an additional 9 months. The Department considers the price fair and reasonable.

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

During the 2026 season, MSFS will continue the pilot with Helm and concurrently go through a competitive procurement process in preparation for the 2027 season.

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).

<input type="checkbox"/> Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.
<input checked="" type="checkbox"/> 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’s signatory affirms, understands, and acknowledges Maine’s Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee


1. The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):	Signed by:  <small>51BA1171F8B9463...</small>		
Typed Name:	Kyle Hall, Director of Maintenance and Operations	Date:	4/27/2026

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department’s Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	Signed by:  <small>E2CD3BB47EBC4FB...</small>		
Typed Name:	Marcello Genovese	Date:	4/28/2026