

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		MaineDOT Region 2 Fleet		
Department Contract Administrator or Grant Coordinator:		Michael Colson		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)	\$11,335.94	Advantage CT / RQS #:	RQS 17D 20210601*1140	
CONTRACT	Proposed Start Date:	7 Apr 21	Proposed End Date:	4 May 21
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:		Daigle & Houghton, Hermon, ME		
Brief Description of Goods/Services/Grant:		T11-554 a 2010 patrol truck skipping and popping back in intake		

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before 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

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

T11-554 was skipping and popping back through air intake, tech found #5 pushrod bent and camshaft was bad. Repairs totaling \$11,335.94 were made. The decision to move forward with these repairs was made consistent with Maine DOT Fleet Management's guidance considering the vehicle's age, mileage and anticipated replacement schedule. The estimated replacement cost for this vehicle is \$188,000.00. This unit is not currently scheduled to be replaced. The decision to use a commercial repair facility was made after careful consideration of the availability and expertise of Department personnel and the

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PART III: SUPPLEMENTAL INFORMATION

operational need to get the equipment back in service.

2. Provide a brief justification for the selected vendor to supplement the response in Part II.

The Fleet Augusta heavy shop was busy and is down 4 techs. The vendor for this work was able to get it in a couple of days and has International trained technicians along with all the special tools for the repair and replacement of the parts associated with this issue. The magnitude of this repair was considered, and the logical decision was to send this unit to the dealer.

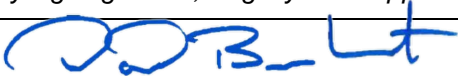

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

Daigle & Houghton is an International dealer and Fleet Services has negotiated a lower labor rate with them, we have also had work done there in the past and when compared with the other International dealer their rates were the same or in some cases a little cheaper. They are able to efficiently and cost effectively do a repair of this significance. This repair would not have been something the department could have cost effectively done and completed in a timely manner.

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

If more International truck dealers and service facilities would move into more locations within the state, it would potentially foster better competition.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
Printed Name:	David Bernhardt	Date:	5/27/21
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> 		
Printed Name:	<small>066BB96EE5347F...</small> Michelle Fournier	Date:	6/4/2021