### 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:                     |                                       |                    | Skowhegan Fleet Reg 3  |  |                                   |                 |         |  |  |
| Department Contract Administrator or Grant Coordinator: |                                       |                    | Dwayn Rich   |  |                                   |                 |         |  |  |
| (If applicable) Department Reference #:                 |                                       |                    |  |  |                                   |                 |         |  |  |
| Amount: (Contract/Amendment/Grant) \$6,199.00           |                                       |                    | Advantage CT / RQS #: RQS 17   |  | RQS 17D                           | D 20210611*1184 |         |  |  |
| CONTRACT  | Pr                                    | oposed Start Date: | 5/12/21  |  | Proposed End Date:                |                 | 5/25/21 |  |  |
| AMENDMENT   | IDMENT Original Start Date:           |                    |  |  | Effective Date: New End Date:     |                 |         |  |  |
|   |                                       | Previous End Date: |  |  |                                   |                 |         |  |  |
| GRANT   | Project Start Date: Project End Date: |                    |  |  | Grant Start Date: Grant End Date: |                 |         |  |  |
| Vendor/Provider/Grantee Name, City, State:              |                                       |                    | Daigle & Houghton, Hermon, ME  |  |                                   |                 |         |  |  |
| Brief Description of Goods/Services/Grant:              |                                       |                    | T01-277 a 2014 Wheeler truck with low power and engine light on, tech found fuel pressure codes and fuel pressure relief valve codes |  |                                   |                 |         |  |  |

| PART II: JUSTIFICATION FOR VENDOR SELECTION   |                                   |  |                                  |  |  |  |  |  |
|---|-----------------------------------|--|----------------------------------|--|--|--|--|--|
| Mark an "X" before the justification(s) that applies to this request. (Check all that apply.) |                                   |  |                                  |  |  |  |  |  |
|   | A. Competitive Process            |  | G. Grant                         |  |  |  |  |  |
|   | B. Amendment                      |  | H. State Statute/Agency Directed |  |  |  |  |  |
| Х   | C. Single Source/Unique Vendor    |  | I. Federal Agency Directed       |  |  |  |  |  |
|   | D. Proprietary/Copyright/Patents  |  | J. Willing and Qualified         |  |  |  |  |  |
|   | E. Emergency                      |  | K. Client Choice                 |  |  |  |  |  |
|   | F. University Cooperative Project |  | 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.

T01-277 was sent to Daigle and Houghton for an issue with no power and the engine light was on. More testing found the fuel pump had malfunctioned and ruined the fuel high pressure rails. This resulted in needing to replace the fuel pump and rails. Repairs totaling \$6,199.00 were made. The decision to move forward with these repairs was made consistent with MaineDOT Fleet Management's guidance considering the vehicle's age, mileage, and anticipated replacement schedule. The estimated replacement cost for this vehicle is \$225,000.00. This unit is not currently on the replacement schedule. The decision to use a commercial repair facility was

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#### **PART III: SUPPLEMENTAL INFORMATION**

made after careful consideration of the availability of Department personnel and the operational need to get the truck back in service.

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

The truck was sent to Daigle and Houlton because they could get it in and the repairs could be completed in the least amount of time with a fair price. The estimate was reviewed and the Region gave the go-ahead for the repairs needed. All Fleet garages are full of repair work and short on techs. The season is starting for road work and wheelers will be needed, so the decision was made to pursue the quickest means of repair.

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

The Region requested the vendor to provide a price quote for the work that needed to be done. The quote was reviewed by the Region. The vendor offered a fair, lower labor rate, availability to get the truck in, access to all parts that needed to be ordered, and repairs could be completed quickly. The decision was made to have the vendor complete the repairs.

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

MaineDOT strives to keep repairs in-house but the current workload at the Fleet garages and staffing challenges results in some work needing to be done by qualified vendors. The Region works to get the best price and best available timeframes to get the repairs completed.

| PART IV: APPROVALS                                   |   |       |           |  |  |  |  |
|--|---|-------|-----------|--|--|--|--|
| Signature of requesting<br>Department's Commissioner | T DV SIGNING DEIDW I SIGNIV MALL ADDIOVE OF HIS DIOCHTEMENT LEGUEST |       |           |  |  |  |  |
| (or designee):                                       | ODB_Lt  |       |           |  |  |  |  |
| Printed Name:  | David Bernhardt   | Date: | 6/9/21    |  |  |  |  |
| Signature of DAFS                                    | DocuSigned by:  |       |           |  |  |  |  |
| Procurement Official:                                | Michelle Fournier   |       |           |  |  |  |  |
| Printed Name:  | ─   | Date: | 6/14/2021 |  |  |  |  |