



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:		Secretary of State, Bureau of Motor Vehicles, Division of Driver License Services	
Department Contract Administrator or Grant Coordinator:		Christopher Ireland, Director of License Services	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ \$207,187.50	Advantage CT / RQS #:	20220622000000003469
CONTRACT	Proposed Start Date:	5/1/2022	Proposed End Date: 4/30/2025
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:		Intellectual Technology, Inc. 2980 E. Coliseum Blvd. Fort Wayne, IN 46805	
Brief Description of Goods/Services/Grant:		Annual software licenses and maintenance support including upgrades and/or enhancements to the Knowledge Testing and Road Skills Testing Systems.	

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 Maine Bureau of Motor Vehicles purchased software from Solutions Thru Software Inc. who developed and highly customized the solution to support Maine's written and road skills testing processes. The software is still being utilized and continues to perform as expected. The software is now seven years old and will require upgrades and enhancements to remain in peak performance. The Bureau would prefer to continue using this customized software.

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

This vendor was selected during the RFP process, RFP 201205314, and awarded the contract, CT 29B 20121217000000002330. This product is still being utilized.

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

A quote was provided by the vendor for the software licenses and maintenance support, which includes updates and enhancements required by the Bureau. Since this program is already being utilized and only requires updates and enhancements it was determined the cost would be far less than starting over with a new vendor and system.

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

When the current system is no longer viable and needs to be replaced, the Bureau will go out to RFP.

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

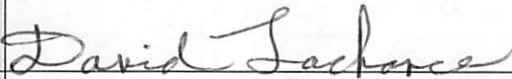
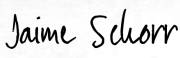
Does this request utilize ARPA/MJRP funds?

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

No – If No, proceed to Part V.

### PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):		
Typed Name:	David Lachance	Date: 6/29/2022
Signature of DAFS Procurement Official:		
Typed Name:	Jaime Schorr	Date: 6/29/2022