



### 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:		Department of Marine Resources, Bureau of Marine Science	
Department Contract Administrator or Grant Coordinator:		Bethany Trussell / Amanda Webb	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 15,246.00	Advantage <u>CT</u> / RQS #:	13A 20230530000000003432
CONTRACT	Proposed Start Date:	<b>5/8/2023</b>	Proposed End Date: <b>6/12/2023</b>
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:		PDQ Door Company, Inc West Bath, ME	
Brief Description of Goods/Services/Grant:		Replace metal fire doors in Aquarium	

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 checked="" 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 Department has received emergency supplemental funds to expedite repairs to the Maine State Aquarium (MSA) to facilitate opening in Summer 2023. Without the required repairs, the Department will not be able to open to the public in a safe and informative manner. The MSA was closed in 2020 because of the COVID 19 pandemic. An attempt to reopen in 2022 was made, several significant issues impacting visitor safety, animal health and wellbeing, and facility integrity were identified. The MSA serves as a regional draw for Lincoln County and the Boothbay Harbor Region, with 30,000 visitors prior to the pandemic.

**The current doors in the Aquarium present a safety issue. Due to saltwater rusting and corrosion, the doors do not open or close properly.**

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

This vendor is the only vendor that has responded to our request for services. This vendor can complete the installation of the doors in time for the Aquarium opening.

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

Funding from the supplemental budget for the reopening of the Maine State Aquarium must be encumbered by June 30, 2023. The negotiated budget with vendor is fair and reasonable given the scope and timing of the project.

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

In the future funds will not need to be encumbered so quickly allowing for additional time seek out alternative vendors.

### 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:	Patrick Keliher, Commissioner	Date:	6/5/23
Signature of DAFS Procurement Official:	DocuSigned by:  891CE7A1493D45B...		
Typed Name:	Martha Verhille	Date:	6/6/2023