



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:		Agriculture, Conservation & Forestry		
Department Contract Administrator or Grant Coordinator:		Meagan Hennessey		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 500,000.00	Advantage CT / RQS #:	CTMV 01A 20220415*6
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	10/1/2021	Effective Date:	7/1/2023
	Previous End Date:	6/30/2023	New End Date:	6/30/2025
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Multiple		
Brief Description of Goods/Services/Grant:		Lab Testing		

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 type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input checked="" 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 purpose of this amendment is to increase funds and extend term. Contractor to perform lab presence of per- and polyfluoroalkyl substances chemicals (PFAS). Sample media may be milk, manure, sludge, soil, groundwater, surface water, vegetative material and/or tissue, animal tissue, and other types as necessary and agreed upon in accordance with all applicable testing protocols and industry standards, including certification requirements.

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

The Department of Agriculture, Conservation & Forestry (DACF) uses multiple PFAS laboratory testing services under this CTMV due to the nature of PFAS sampling and testing. The laboratories used have been approved by the Department of Environmental Protection (DEP); see CTB 20181211*0037. Some PFAS laboratory testing services only test plant tissue, water, soil, and milk. Others specifically test animal tissue. Multiple laboratories are needed for in order to have flexibility to switch when fast turnaround times for testing results are essential.

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

Vendors are paid based on quotes that the DACF requested for testing, on a variety of media, for the presences of Per- and polyfluoroalkyl substances (PFAS). For each type of media, pricing is provided for the following 4 "Turn Around Times" (TAT): 20 business days, 15 business days, 10 business days & 5 business days. TAT defines when the lab results will be sent to BAFRR. TAT is strictly monitored, and laboratories are held to the pricing structure originally agreed upon.

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

Due to lack of labs who test for PFAS, we are limited to the current labs under this CTMV until any new labs are created here in Maine that will test for these specific PFAS chemical compounds.

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):

Randy Charette

Typed Name:

Randy Charette

Date:

6/7/2023

Signature of DAFS Procurement Official:	<p>DocuSigned by: <i>Kathy Paquette</i> 41C2BA36FAF44CD...</p>		
Typed Name:	Kathy Paquette	Date:	6/9/2023