

**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:		Marine Resources, Bureau of Marine Science	
Department Contract Administrator or Grant Coordinator:		Michael Erwin / Amanda Webb	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 10,400.00	Advantage <u>CT</u> / RQS #:	13A 20230428000000002981
CONTRACT	Proposed Start Date:	5/5/2023	Proposed End Date: 5/6/2024
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:		TB2 dba Conley's Garden Center, Boothbay ME	
Brief Description of Goods/Services/Grant:		Lawn care/ landscaping services	

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

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.	This is to provide tree trimming and landscaping needs. Work needs to start asap.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	Conley's Garden and Landscaping has been doing work for DMR for several years. They are licensed arborists who take care of all our tree trimming. We reached out to other companies in the area but have not gotten any replies.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Fair market pricing was taken into consideration.
4. Describe the plan for future competition for the goods or services.	DMR will continue to look for qualified contractors, who have experience in this line of work, to do these kind of specialty jobs.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> 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:	Meredith Mendelson, Deputy Commissioner	Date:	6/13/23
Signature of DAFS Procurement Official:	<div style="border: 1px solid black; padding: 2px;"> DocuSigned by: <i>Martha Verhille</i> 891CE7A1493D45B... </div>		
Typed Name:	Martha Verhille	Date:	6/14/2023