



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:		Judicial Marshal Office	
Department Contract Administrator or Grant Coordinator:		Ted Ross - Marshal	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	5,131.48	Advantage CT / RQS #:	20230605*1518
CONTRACT AMENDMENT GRANT	Proposed Start Date:	4/27/2023	Proposed End Date: 6/30/2023
	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Seacoast Security (Mailing Address – PO Box A, West Rockport, ME 04865 Physical Address – 290 West St. West Rockport, ME 04865)	
Brief Description of Goods/Services/Grant:		Monitors designated alarm systems across the state and performs repairs and maintenance as needed	

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 Judicial Branch currently has in place an alarm system for duress, intrusion and fire etc. in designated court locations. This system was installed, monitored and maintained with Seacoast Security. The vendor was originally selected by competitive bid and has maintained the systems accordingly for an extended period of years. It continues to be the sole provider for said service(s)

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

Seacoast Security provides the above-mentioned function for the Judicial Branch, being the only provider able to adequately and properly provide the service.

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

Seacoast Security took over ownership and subsequently responsibility for the prior vendor. The Judicial Branch has maintained this service since that point because they have the ability to not only service, but also monitor the systems in place. This request of 5,131.48 (monitor service and repairs) was for cost exceeding 5,000.00 for the fiscal year requiring a PJF being completed and are for services noted in the attached invoices to this PJF.

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

With competition limited to specific vendors the Marshal Office will continue to maintain awareness of future options. It is unknown at this time what viable vendors will be available in the future.

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

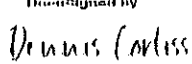
Does this request utilize ARPA/MJRP funds?

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):	Digitally signed by 	Date:	6/9/2023
Typed Name:	Dennis Corliss	Date:	

Procurement Justification Form (PJF)

Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i>	
Typed Name:	2D5B6E39F57E44A... william J.E. Allen	Date: 6/20/2023