



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:		Mary Casey		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)	\$25,000.00	Advantage CT / RQS #:	01A 20240513000000003210	
CONTRACT	Proposed Start Date:	6/1/2024	Proposed End Date:	10/31/2024
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:		Berthier Boutin, PO Box 283, Fort Kent ME 04743		
Brief Description of Goods/Services/Grant:		To install for New Roof at Allagash Facility		

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 contractor will remove the old roof and dispose of all old materials. The contractor will supply and install all new materials to include: new underlayment, ridge vent and starter cap, ice and water shield and Timberline Architecture 30 year shingles and all the labor involved.

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

We received two bids and 1 refusal to bid and this Vendor was the lowest bid of the bids received.

- 1) Kevin Currie \$36,485.00
- 2) Berthier Boutin \$25,000.00
- 3) Allan Albert Refused to bid

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

All the materials and specifications were comparable with each bid.

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

In the future, we will continue to put projects like this out for bid.

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

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):	DocuSigned by: <i>Randy Charette</i> 8F3DB450C23241F...		
Typed Name:	Randy Charette, Deputy Commissioner	Date:	5/24/2024
Signature of DAFS Procurement Official:	DocuSigned by: <i>Kathy Paquette</i> 41C2BA36FAF44CD...		
Typed Name:	Kathy Paquette	Date:	6/4/2024