



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: | | DOL | |
| Department Contract Administrator or Grant Coordinator: | | Samantha Fenderson | |
| (If applicable) Department Reference #: | | | |
| Amount: (Contract/Amendment/Grant) | | \$ 23, 215 | Advantage CT / RQS #: 20240523*3368 |
| CONTRACT | Proposed Start Date: | 6/24/2024 | Proposed End Date: 8/2/2024 |
| 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: | | Northeast charter and tour company Inc. | |
| Brief Description of Goods/Services/Grant: | | The Provider shall provide transportation services for northern and southern college bus tours for BRS clients. | |


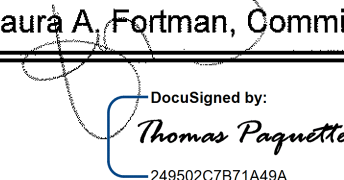
| PART II: JUSTIFICATION FOR VENDOR SELECTION | | | |
|--|-----------------------------------|-------------------------------------|----------------------------------|
| Check the box below for the justification(s) that applies to this request. (Check all that apply.) | | | |
| <input checked="" type="checkbox"/> | A. Competitive Process | <input type="checkbox"/> | G. Grant |
| <input 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 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 | |
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| 1. | Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I. |
| | Available and accessible bus company (NORTHEAST CHARTER & TOUR CO) was hired to provide transportation services for northern and southern college bus tours for BRS clients. |
| 2. | Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable. |
| | In February 2024 RFP202402034 was issued but no interested parties submitted a bid at that time. Northeast charter & tour Co. was willing and qualified but failed to submit a bid. Due to time constraints, procurement gave permission to use willing and qualified (Northeast Charter and tour Co) vendor rather than to issue another RFP. Additionally, procedure guidance from procurement changed midway through this process. Intiially, RFP's were required for services over \$10,000, and after the RFP was completed the guidance was that services over \$25,000 required an RFP, and services under \$25,000 only required 3 bids. |
| 3. | Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee. |
| | Northeast Charter bus line is providing a coach and driver for the two-week bus tour. The bus is accessible which was a requirement for participant on the bus tour. Cost of the bus is in line for industry standards. |
| 4. | Describe the plan for future competition for the goods or services. |
| | Depending on the cost of the service, the administrator will either solicit and gather 3 quotes, will go out to bid or will investigate master agreements with bus and charter companies. |

| PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP) | |
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| Does this request utilize ARPA/MJRP funds? | |
| <input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s). | |
| <input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies. | |
| <input checked="" type="checkbox"/> No – If No, proceed to Part V. | |

| PART V: APPROVALS | |
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| The signatures below indicate approval of this procurement request. | | | |
| Signature of requesting Department's Commissioner (or designee): |  | | |
| Typed Name: | Laura A. Fortman, Commissioner | Date: | 6/13/2024 |
| Signature of DAFS Procurement Official: |  <small>DocuSigned by: Thomas Paquette 249502C7B71A49A...</small> | | |
| Typed Name: | Thomas Paquette | Date: | 6/13/2024 |