



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:		Department of Agriculture, Conservation and Forestry – Maine Geological Survey	
Department Contract Administrator or Grant Coordinator:		Amber Whittaker	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 23,900.00	Advantage CT / RQS #:	CT 01A 20240611*3656
CONTRACT	Proposed Start Date:	7/1/2024	Proposed End Date: 5/30/2025
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:		GeoSep Services, LLC, Moscow, ID	
Brief Description of Goods/Services/Grant:		Zircon separation and U-Pb dating of zircons	

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.

GeoSep Services will separate zircons from whole rock samples; select, mount, grind, and polish zircons, and conduct U-Pb laser ablation ICP-MS analysis with the goal of obtaining ages of the zircon samples. The samples are for igneous and detrital zircon dating in Maine as part of the USGS-funded STATEMAP geologic mapping program. The Maine Geological Survey does not have the facilities to conduct this kind of specialized analysis.

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

GeoSep Services is one of only two commercial labs in the U.S. that provide this kind of analytical service; previously MGS has used Arizona LaserChron for this service. Recently, Arizona LaserChron has had such a huge backlog of samples that results were not obtained in the contracted 8- to 12-week window, but instead after 20+ weeks, which puts the grant project behind schedule. GeoSep Services provided data last year in a very timely manner with exemplary communication on sample analysis.

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

GeoSep Services rates are slightly higher than the only other competitor, but results from the competitor cannot be obtained within the grant cycle.

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

MGS will continue to work with both service providers depending on grant requirements.

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:
Randy Charette
8F3DD450C23241E...

Typed Name:

Amanda E. Beal, Commissioner

Date:

6/17/2024

Signature of DAFS Procurement Official:	<p>DocuSigned by: <i>Kathy Paquette</i> 41C2BA36FAF44CD...</p>		
Typed Name:	Kathy Paquette	Date:	6/18/2024