



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		Department of Corrections, Maine State Prison	
Department Contract Administrator or Grant Coordinator:		Robert Walden	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 9,263.50	Advantage CT / RQS #:	03B 20250616*1947
CONTRACT	Proposed Start Date:	4/22/2025	Proposed End Date: 6/23/2025
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:		Copeland's Garage Warren, Maine	
Brief Description of Goods/Services/Grant:		Repairs to Truck 8	

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 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

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.

Due to several broken wires touching, resulted in the drivers air bag going off rendering the vehicle undrivable, required new wiring and replaced the air bag. Replaced the exhaust clamp. Replaced both hood cables. Repaired and rerouted wiring under air filter. Repaired wiring in driver door and in flex boot to driver door. Removed and replaced glow plugs, one of which required drilling due to breaking off in the head. Oil and filter change.

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

Due to the emergent nature and limited vendors licensed to service this vehicle, Copeland's was selected due to both their proximity, established ability and willingness to service large vehicles of this nature.

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

The negotiated rates are fair, reasonable and competitive with other vendors.

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

Maine State Prison will continue to utilize the competitive process for routine purchases.

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.


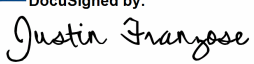
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

The requesting department signatory understands and acknowledges Maine's Conflict of Interest statutes.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Randal Liberty	Date:	6/16/25
Signature of DAFS Procurement Official:	DocuSigned by:  AEED9C7B3A8044E...		
Typed Name:	Justin Franzose	Date:	6/20/2025