



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 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:		Environmental Protection, Division of Air Quality Assessment, Air Monitoring		
Department Contract Administrator or Grant Coordinator:		David Lemery		
(If applicable) Department Reference #:				
Agency Department Code:	06A	Advantage CT / RQS #:	20260410*1602	
Amount: (Contract/Amendment/Grant)	\$ 36,325.50 total			
	\$ 8,375.00			
	Fund code: 013-06A-1292-13 Program H2S			
	\$ 8,000			
	Fund code: 010-06A-0250-10			
	\$ 19,950.50			
	Fund code: 014-06A-1753-14			
CONTRACT	Proposed/Original Start Date:	5/1/2026	Proposed/Most Recent End Date:	12/30/2026
AMENDMENT	New Effective Date:		New End Date (if Applicable):	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Wilbur Technical Services, LLC; Mount Vernon, NH		
Brief Description of Goods/Services/Grant:		Purchase of three (3) Teledyne N400 ozone monitors.		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
☐	A. Competitive Process	☐	G. Grant
☐	B. Amendment	☐	H. State Statute/Agency Directed
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed

☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☐	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	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 State of Maine DEP Bureau of Air Quality operates a statewide network of ozone analyzers and calibrators, which allows for the monitoring of air quality necessary to document compliance with the federal health-based National Ambient Air Quality Standard for ozone. Such monitoring is required per the Clean Air Act (CAA) section 105 grant the department receives.

As these instruments age, it becomes more difficult to keep them operating per federal regulatory requirements. Nine of our existing ozone analyzers in our inventory are approximately 1.5 times their expected lifespan, and obtaining new replacements is critical to maintaining the ozone monitoring network. We presently operate Teledyne API instruments in our network. Staying with this manufacturer will eliminate the costs of having to reconfigure the site's entire ozone monitoring system in order to incorporate a different make and model of unfamiliar ozone analyzers.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

Wilbur Technical Services is the only vendor authorized to sell the Teledyne API equipment within our region.

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

The department applied for and was granted funding via a CAA section 103 Inflation Reduction Grant. A recent amendment to this grant allows for the remaining funds to be used to partially fund the purchase of one ozone analyzer.

This grant may be used for any activity authorized under CAA Section 103. CAA Section 103 authorizes "the coordination and acceleration of, research, investigations, experiments, demonstrations, surveys, and studies relating to the causes, effects (including health and welfare effects), extent, prevention, and control of air pollution."

The remaining funds are via state supplemental funding obtained specifically for new and replacement air quality equipment.

PART III: SUPPLEMENTAL INFORMATION

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

We continue to review commercial product literature, attend trade shows, and routinely exchange technical information with peers from EPA and state other monitoring agencies. Through such efforts, we are educated and remain aware of the state of commercial air monitoring technology.

With this knowledge, the department can maintain awareness of competitive options that meet our program needs and compatibility with existing systems.

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) or (026) – 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's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting
Department's Commissioner
(or designee):

David R. Madore for Melanie Loyzim

06/03/2026

Typed Name:

Melanie Loyzim, Commissioner

Date:

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Procurement Justification Form (PJF)

Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	DocuSigned by: <i>Michael McNeil</i> 7008796FB36A449...		
Typed Name:	Michael McNeil	Date:	6/3/2026

NOI 0620260397 6/3-6/9