

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:	Judicial Marshal Office		
Department Contract Administrator or Grant Coordinator:	Ted Ross - Marshal		
(If applicable) Department Reference #:			
	5,794.00	Advantage CT / RQS	20220701*0003
CONTRACT AMENDMENT GRANT	Proposed Start Date:	7/15/2022	Proposed End Date: 730/2022
	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	Seacoast Security Inc., PO Box A 290 West St., West Rockport, Maine 04865		
Brief Description of Goods/Services/Grant:	Replace and upgrade console and duress button – Lewiston District Court, 71 Lisbon St., Lewiston, Maine 04243		

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.

To Replace and upgrade the operating console and replace antiquated duress buttons as well as increase the ability to add duress buttons (wireless) in Lewiston DC. This will increase security response as well as enable to opportunity to expand coverage.

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

This vendor is servicing the current system and all related systems throughout the State to include monitoring of the alarm systems. The vendor was originally selected as a sole source vendor due to lack of competition to service the State in the capacity in which it serves.

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

These rates are fair and reasonable due to a quote being provided (attached) which is an industry standard we see typically when requesting quotes for similar items and installation. Funding was/is utilized through current budget monies reallocated. This is for material(s) only, labor of installation was approved and will be covered by Facilities who is covering additional work within a separate project.

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

With competition limited to vendors many miles away and the inability to provide statewide service, It is unknown at this time what viable vendors will be available in the future.

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

Does this request utilize ARPA/MJRP funds?

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

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):



Typed Name:

Dennis A Cortiss

Date:

7/8/22

Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i>		
Typed Name:	<small>2D5B6E39F57E44A...</small> William J.E. Allen	Date:	7/27/2022

NOI 0720220731 07/27/2022 - 08/02/2022