



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:		Dixfield Fleet REG 3	
Department Contract Administrator or Grant Coordinator:		Roger Berry Jr.	
(If applicable) Department Reference #:		T21-709	
Amount: (Contract/Amendment/Grant)	\$5,678.56	Advantage CT / RQS #:	20230705000000000002
CONTRACT	Proposed Start Date:	<b>5/25/2023</b>	Proposed End Date: 6/1/2023
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:		Beauregard equipment, Bangor Maine	
Brief Description of Goods/Services/Grant:		Loader in Derate (low power mode)	

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.

T21-709 loader went into derate (low power mode) and would not accelerate. Sent one of our tech's out to see what was going on with it. The tech found that it had an engine light on and a message on the dash that said engine warn low power mode. The tech then checked the fuel filters, air filter and found them to be all new. He also looked at the DEF tank to make sure it was full (and it was). So, we called Beaugard equipment to see if they could look at it, and they could. We hauled it to Beaugard equipment in Bangor. They hooked their diagnostic computer up to it and found it has codes was for DEF quality bad and DEF temp. they pulled the tank out and found a brown sludge in the bottom of the tank. So, after pulling the DEF system apart they determined that the whole system was contaminated. They called us with an estimate with what was wrong and what needed to be done and it was \$5678.56 so we had them go-ahead with the repair that was needed to complete the job.

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

With the work not able to be done inhouse as we don't have the testing equipment, we decided to reach out to Beaugard equipment to see if they were able to do this job in a timely manner, with Beaugard equipment having certified technicians trained with the proper tools and training to complete this job. Beaugard equipment was able to get right on the repairs.

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

After sending the loader to Beaugard Equipment they called with an estimate for repair to the DEF system. The repair needed was a new DEF module, all new line and a new DEF injector, also the tank needed to be cleaned and flushed out, then have the system cleared of all the codes that were set by the bad DEF fluid. We had them go ahead with the repairs needed to the DEF system.

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

With us not having any of the specialty tools or testing equipment or the computer programming to diagnose the Case equipment. Also, with our tech's not having any Case training, we must go to the Case equipment dealer. With there not many dealers around we are limited to where to go.

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

Does this request utilize ARPA/MJRP funds?

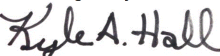
Yes – If Yes, please attach the approved Business Case(s).

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):

DocuSigned by:  
  
51BA1171F8B9463...

Typed Name:

Kyle Hall, Director Maintenance &  
Operations

Date:

6/30/2023

**Procurement Justification Form (PJF)**

Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> <small>2D5B8E39F57E44A</small>		
Typed Name:	william J.E. Allen	Date:	7/12/2023

NOI 0720230757 07/12/2023 - 07/18/2023