



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:		Judicial Branch / Facilities	
Department Contract Administrator or Grant Coordinator:		Curt J Lefebvre	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 6700	Advantage CT / RQS #:	20240710*0036
CONTRACT	Proposed Start Date:	7/5/2024	Proposed End Date: 7/12/2024
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:		Sticht Property Management, Liberty, ME.	
Brief Description of Goods/Services/Grant:		Emergency repair to the chiller system	

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.

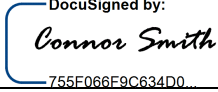
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
The chiller that cools the Presque Isle District Court was inoperable over the holiday weekend and needed to be repaired before court went back in session on Monday morning to be able to conduct court business for the public.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
Sticht Property Management was the only vendor who responded to the repair request and the only one who would do the repair over the holiday weekend. <small>Click or tap here to enter text.</small>	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
The cost for the chiller repair is consistent with what we have paid at other court locations for the same types of repairs. <small>Click or tap here to enter text.</small>	
4. Describe the plan for future competition for the goods or services.	
These services will be put out for public bid in the future, this is a stopgap while the MJB Procurement Dept gets everything in order.	

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> 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):	 <small>DocuSigned by: Connor Smith 755F066E9C634D0...</small>		
Typed Name:	Connor Smith	Date:	7/10/2024
Signature of DAFS Procurement Official:			
Typed Name:		Date:	