



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:		DAFS/BABLO	
Department Contract Administrator or Grant Coordinator:		Michael Boardman, Deputy Director	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$5,620.66	Advantage CT / RQS #:	RQS 18L 20240618*1819
CONTRACT	Proposed Start Date:	1/5/2024	Proposed End Date: 3/19/2024
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:		WD Matthews Machinery Company, Auburn, ME	
Brief Description of Goods/Services/Grant:		Forklift Servicing and Repair	

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.

The Maine Lottery is responsible for generating revenue for the state of Maine through the sale of lottery tickets. Equipment and supplies for the sales force route through the Lottery warehouse at 10 Water St. in Hallowell and require the use of a safe, well-maintained, readily operational forklift operated by a certified forklift operator to move and arrange products.

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

The vendor is the authorized service provider for Toyota forklifts in Maine. Specializing in maintenance and repair of Toyota forklifts and maintaining ready access to the flow of supplies necessary to maintain the Lottery's forklift in useful condition, WD Matthews is the only logical selection for sole source support.

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

WD Matthews is the authorized Toyota forklift maintenance and repair provider in Maine. Parts and labor costs seem to be in-line with costs expected for a high-value piece of machinery that is approaching the end of its useful life.

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

Sole source. WD Matthews is the Toyota forklift service provider in Maine.

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.


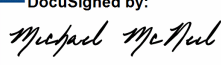
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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:	Michael Boardman	Date:	6/18/2024
Signature of DAFS Procurement Official:	DocuSigned by:  7008796FB36A449...		
Typed Name:	Michael McNeil	Date:	7/31/2024

NOI 0720240857

