



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/OIT/Data Center Operations	
Department Contract Administrator or Grant Coordinator:		Roger Gagnon	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 85,256.64	Advantage CT / RQS #:	CT 18B 20240711-0068
<b>CONTRACT</b>	Proposed Start Date:	<b>8/1/2024</b>	Proposed End Date: 7/31/2027
<b>AMENDMENT</b>	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Kennebec Cooling and Heating, LLC Clinton, ME 04927	
Brief Description of Goods/Services/Grant:		HVAC PREVENTIVE MAINTENANCE & SERVICE FOR DATA CENTERS	

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.

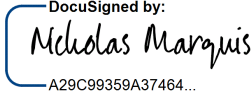
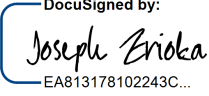
<b>PART III: SUPPLEMENTAL INFORMATION</b>	
<b>1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.</b>	<p>Kennebec Cooling and Heating, LLC, provides support, preventative maintenance and executes necessary emergency repairs on the State of Maine’s equipment located at four (4) sites in Augusta: Site one (1). (RPU1, RPU2, Crah1, Crah2, 15 LIEBERT in row coolers, and dehumidifier; Site two (2): UPS room DAIKIN split system, Telecom room DAIKIN split system, Liebert CRAH unit #4 (data center); and Site three (3): 51 Commerce Telecom rooms 1-4 DAIKIN split systems maintenance and emergency services. Site four (4) Cross Office Building basement MDF – LIEBERT AC. Quarterly per year, per site, for scheduled preventative maintenance service visits for three (3) years.</p> <p>Added an additional \$60,000 for potential future repairs based on historical expenditures, but this will only be used if a special repair is needed for the units.</p>
<b>2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.</b>	<p>Kennebec Cooling and Heating, LLC is trained and supports the variety of OIT Liebert cooling equipment used in the OIT Data Center and equipment rooms. (LIEBERT Certified)</p>
<b>3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.</b>	<p>The cost only increased by \$1,400 per year from the previous agreement which remained flat for 3 years. The total labor only increased by \$10 an hour which is a minor increase based on the current economic state.</p>
<b>4. Describe the plan for future competition for the goods or services.</b>	<p>Service will be “Single Source/Unique Vendor” because of the Certified Liebert Technician which is required for the State of Maine Equipment.</p>

<b>PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS &amp; RECOVERY PLAN (MJRP)</b>	
<b>Does this request utilize ARPA/MJRP funds?</b>	
<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.	

<b>PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE</b>	
<b>Does the requesting Department signatory understand and acknowledge Maine’s COI Statute?</b>	
<input checked="" type="checkbox"/> Yes, the requesting Department understands and acknowledges <a href="#">MRS Title 5, §18-A, 2.</a>	

**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 A29C99359A37464...		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	7/30/2024
Signature of DAFS Procurement Official:	 EA813178102243C...		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	7/26/2024