



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: | Maine Department of Transportation (Maine State Ferry Service) | | |
| Department Contract Administrator or Grant Coordinator: | Jim Savoy | | |
| (If applicable) Department Reference #: | | | |
| Amount: (Contract/Amendment/Grant) | \$ 60,000.00 | Advantage CT / RQS #: | 20220727000000000145 |
| CONTRACT | Proposed Start Date: | 7/15/2022 | Proposed End Date: 7/14/2024 |
| 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: | Milton Cat | | |
| Brief Description of Goods/Services/Grant: | Repair and maintenance parts and supplies for Caterpillar engines and generators on MSFS vessels | | |

| 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. | |
| We use Cat parts for maintenance of our engines and generators. Per a conversation with the Service Manager, Cat recommends we use OEM parts for all maintenance/repair by our Engineers as this will help with warranty issues if they arise. Tier 3 status can, or may, be affected and is not as severe an issue. | |
| 2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable. | |
| Milton Cat is New England provider for engines to Maine State Ferry Service. They are also dealer for depot level maintenance through maintenance contract. We use Cat filters/supplies/consumables to maintain warranty and Tier 3 certification for our engines. | |
| 3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee. | |
| Milton Cat has agreed to the following terms for parts purchases. <ol style="list-style-type: none"> 1. 25% discount off retail for all fuel, lube oil and air filters/dust filters. 2. All other parts and fluids will be purchased at retail prices 3. Going forward, we will work to have an MA in place for parts purchases | |
| 4. Describe the plan for future competition for the goods or services. | |
| MSFS will work to ensure OEM part are sourced responsibly to maintain warranty through discount that may be granted to MSFS by Milton Cat. | |

| PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP) | |
|---|--|
| Does this request utilize ARPA/MJRP funds? | |
| <input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s). | |
| <input checked="" type="checkbox"/> 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: | William Pulver, C.O.O. | Date: | 7-27-2022 |
| Signature of DAFS Procurement Official: | DocuSigned by:  <small>2D5B6E39F57E44A...</small> | | |

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|-------------|--------------------|-------|----------|
| Typed Name: | William J.E. Allen | Date: | 8/2/2022 |
|-------------|--------------------|-------|----------|

NOI 0820220752 08/02/2022 - 08/08/2022