



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: | | Agriculture, Conservation & Forestry | |
| Department Contract Administrator or Grant Coordinator: | | Mary Casey | |
| (If applicable) Department Reference #: | | | |
| Amount: (Contract/Amendment/Grant) | \$ 9,999.98 | Advantage CT / RQS #: | RQS 01A 20230808-0228 |
| CONTRACT | Proposed Start Date: | 8/14/2023 | Proposed End Date: 9/30/2023 |
| 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: | | United Construction & Forestry, 1505 Caribou Road, New Canada ME 04743 | |
| Brief Description of Goods/Services/Grant: | | Two 2023 John Deere Z530M ZTrak Lawnmowers | |

| 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 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 lawn mowers that we have are no longer any good or worth repair. While there is still lots of mowing season left, we are in desperate need of new mowers in two of our District offices. These mowers are available and being held aside for us at this time. The Vendor cut the price by \$799.00 on each mower for us as well.

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

This Vendor has exactly what we are looking for and they are currently available. There are still some supply chain issues with certain products but they have two of these right now and are willing to hold them for us for a short time.

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

These are very fair prices for the product we need, the dealer knocked \$799.00 off the price of each unit for us.

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

In the future there will be better planning on our part so that we may be able to put this out to bid or explore other dealers in the area.

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: <i>Randy Charette</i> | | |
| Typed Name: | Randy Charette | Date: | 8/8/2023 |
| Signature of DAFS Procurement Official: | DocuSigned by: <i>William J.E. Allen</i> | | |
| Typed Name: | William J.E. Allen | Date: | 8/17/2023 |

