



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:		Department of Defense, Veterans and Emergency Management – for IDS Security State-wide	
Department Contract Administrator or Grant Coordinator:		Tanya L. Schaub, Buyer II	
(If applicable) Department Reference #:		24-015	
Amount: (Contract/Amendment/Grant)	\$ 10,860.00	Advantage CT / RQS #:	CT15A20230811*0322
CONTRACT	Proposed Start Date:	11/1/2023	Proposed End Date: 10/31/2024
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:		Centra-Larm Monitoring Inc 994 Candia Rd Manchester, NH 03109	
Brief Description of Goods/Services/Grant:		Provide central monitoring of intrusion detection systems (IDS) for weapon vaults	

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 Military Bureau is responsible for safeguarding various weapons systems in multiple arms vaults in various armories located throughout the State of Maine. There are 27 monitoring locations physically at 21 different armories. As Part of this protection, the status of the alarm systems needs to be constantly monitored and the appropriate parties immediately notified in case of alarm per Army Regulation 190-11. Physical Security of Army's, Ammunition and Explosives and the Department of Defense (DOD) united Facilities Guide specification 28 20 02, Central Monitoring Services for Electronic Security Systems

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

The State of Maine Military Bureau does not have the capability and there are no other agencies that are known to have this capability.

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

Centra-Larm Monitoring, Inc has held this service contract for several years with the State of Maine Military Bureau. The cost has only increased by 9% since 2019. In fact, it went from \$12K last year to \$10,860 this year, and will remain that through 2028.

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

This service will be put out to bid when more than one supplier can be identified to provide a service that meets the Department of Defense specifications and requirements.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

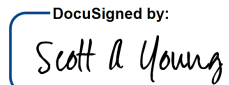
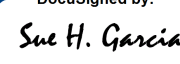
Does this request utilize ARPA/MJRP funds?

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):			
Typed Name:	Scott A Young, Deputy Commissioner	Date:	14 August 2023
Signature of DAFS Procurement Official:			
Typed Name:	Sue H. Garcia	Date:	8/22/2023