



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE 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 Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		DAFS / Bureau of General Services		
Department Contract Administrator or Grant Coordinator:		William Longfellow		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 138,677.35	Advantage CT / RQS #:	RQS 18A 20240812*0202
CONTRACT	Proposed Start Date:	8/5/2024	Proposed End Date:	11/15/2024
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:		GRADON SUPPLY INC dba JOHNSTONE SUPPLY 185 NEW BOSTON STREET WOBURN, MA 01801 VC1000045061		
Brief Description of Goods/Services/Grant:		Chiller Rental		

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

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 chiller on the Greenlaw building failed to maintain temperature and humidity in the building for several months despite multiple attempts to fix the problems. The Department of Health and Human Services' Health and Environmental Testing Laboratory (HETL) occupies the building. The nature of HETL's work requires sensitive, precise, and consistent environmental controls because of the testing and equipment being used. During July 2024, conditions in the building were not able to be sustained which caused programs to be shut down and staff given administrative leave which together, caused very significant cost and programmatic damage. The solution was to find a temporary chiller for the building. The only chiller available was through Johnstone. Multiple vendors were solicited including Trane, Sunbelt, and United Rentals who had nothing in the size we needed. The need for this chiller is three months.

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

Johnstone was the only vendor who had a chiller available. We checked several vendors. Greenlaw needed a chiller immediately and this company was the only one found.

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

The rate charged is the going rate for rental of a chiller of this size, 300 ton.

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

BGS will pursue a backup chiller for Greenlaw in the future through RFP if it is determined a permanent backup chiller is needed.

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.


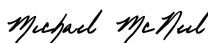
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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:	William Longfellow	Date:	8/12/24
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	Michael McNeil	Date:	8/14/2024

NOI 0820240931