



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:	DACF- Maine Forest Service – Forest Protection Division		
Department Contract Administrator or Grant Coordinator:	Jennifer Wright		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 8400.00	Advantage RQS #:01A	2024082*233
CONTRACT	Proposed Start Date:		Proposed End Date:
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:	Alta Material Handling 114 Hall St Concord, NH 03301		
Brief Description of Goods/Services/Grant:	Purchase of 1 Crown Battery for the Bolton Hill Forklift		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
	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.


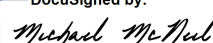
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
This battery purchase is for the forklift at the Bolton Hill Headquarters. The battery is the sole source of power for this machine for moving and lifting.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
Alta is a local vendor that offers parts and service for this type of forklift. Alta has multiple suppliers for the size and configuration of the required battery for this vehicle.	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
We are using a local vendor to keep service and installation costs down. The rates provided are compatible with the market standards. Funding will be through the agency budget.	
4. Describe the plan for future competition for the goods or services.	
We will continue in our efforts to follow the competitive bidding process.	

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

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> 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):	DocuSigned by:  Aimee Carlton <small>554808D3FFE8495...</small>		
Typed Name:	Amanda E. Beal, Commissioner	Date:	8/28/2024
Signature of DAFS Procurement Official:	DocuSigned by:  Michael McNeil <small>7008796FB36A449...</small>		
Typed Name:	Michael McNeil	Date:	8/29/2024

NOI 0820240985