



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:		Defense, Veterans and Emergency Management	
Department Contract Administrator or Grant Coordinator:		Katherine St. Peter-Gunn	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 80,600.00	Advantage CT / RQS #:	20240815*0340
CONTRACT	Proposed Start Date:	11/1/2024	Proposed End Date: 11/30/2024
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:		Big Top Manufacturing LLC 3255 N. US 19 Perry, Florida 32347	
Brief Description of Goods/Services/Grant:		Replacement of damaged end wall and fabric on BLDG T0003	

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 checked="" 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.

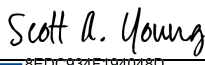
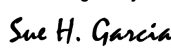
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
The objective of this project is to replace the end wall and fabric of BLDG T0003. This wall has bent support frames and the fabric has torn. This service contract includes replacement of all metal end wall structural steel pieces and new fabric.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
The Department has selected Big Top Manufacturing because the structure was manufactured by Big Top manufacturing, and the replacement parts will be custom made and installed by Big Top manufacturing. These replacement parts are only made, sold, and installed by Big Top Manufacturing	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
The department believes these costs to be fair and reasonable based on their federal General Services Administration schedule GS-07F-073GA.	
4. Describe the plan for future competition for the goods or services.	
The Government will continue to seek out competitive quotes to drive price down, while also seeking the most highly qualified service provider. However, other companies cannot add work to these structures as Big Top Shelters owns the rights and patents to the structures and replacement parts.	

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:  <small>8EDC934F194048D...</small>		
Typed Name:	Scott A. Young, Deputy Commissioner	Date:	8/26/2024
Signature of DAFS Procurement Official:	DocuSigned by:  <small>E5DB92AC0E8D490</small>		
Typed Name:	Sue H. Garcia	Date:	8/30/2024