



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 \$10,000 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:		Department of Agriculture, Conservation and Forestry Bureau of Parks and Lands, Eastern Region Public Lands	
Department Contract Administrator or Grant Coordinator:		Doug Reed	
(If applicable) Department Reference #:			
Agency Department Code:	01A	Advantage CT / RQS #:	CT20250814*0247
Amount: (Contract/Amendment/Grant)		\$25,400.00	
CONTRACT	Proposed/Original Start Date:	9/1/2025	Proposed/Most Recent End Date: 6/30/2028
AMENDMENT	New Effective Date:		New End Date (if Applicable):
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		KI Jo-Mary, North Maine Woods PO Box 425 Ashland, ME 04732 Tel 207-435-6213 Bill@northmainewoods.org	
Brief Description of Goods/Services/Grant:		Setup, maintenance and shutdown of equipment and structures for automated gate located at Henderson Checkpoint.	

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. Higher Education 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 Bureau owns and manages Nahmakanta Public Lands, which is accessible by crossing privately owned land on a privately owned road system. To maintain the traditional public access route to the unit, the Bureau must contract with KI Jo-Mary to operate a checkpoint for access to the area.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	The Bureau is obligated to control access from the Nahmakanta Unit into the North Maine Woods System by agreement when the Unit was first purchased.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The fee covers maintenance of computers, electronics, solar panels and generators to run the gate. There is also 24-hour monitoring by KI Jo-Mary staff from a remote location. When the manual gate was in use, the Bureau paid \$25,000-\$30,000 annually for operating this gate.
4. Describe the plan for future competition for the goods or services.	KI Jo-Mary is the only contractor authorized to operate gates for the North Maine Woods. The Bureau constructed an automatic gate in 2009, which KI Jo-Mary operates and maintains. Other entities are not authorized to operate this gate.

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’s signatory understands and acknowledges Maine’s Conflict of Interest statutes and, in accordance with statute, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.	

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	Signed by:  <small>8F3DD450C23241F...</small>		
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Typed Name:	Randy Charette	Date:	8/22/2025
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2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department's Commissioner (or designee):	N/A		
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Typed Name:		Date:	
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****OSPS Section Only****

Signature of DAFS Procurement Official:	Signed by: Sterling Doiron <small>4C537C52B586437...</small>		
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Typed Name:	Sterling Doiron	Date:	8/25/2025
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Certificate Of Completion

Envelope Id: 3412C9AD-9EF1-45C5-89CE-2FAC553033EF

Status: Completed

Subject: Complete with Docusign: KIJJoMaryCT2.0247.PJF.pdf

Source Envelope:

Document Pages: 3

Signatures: 1

Envelope Originator:

Certificate Pages: 1

Initials: 0

Sterling Doiron

AutoNav: Disabled

77 State House Station

Envelopeld Stamping: Disabled

111 Sewall Street

Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Augusta, ME 04333

Sterling.Doiron@maine.gov

IP Address: 71.169.188.88

Record Tracking

Status: Original

Holder: Sterling Doiron

Location: DocuSign

08/25/2025 | 10:09

Sterling.Doiron@maine.gov

Signer Events

Sterling Doiron

Sterling.Doiron@maine.gov

Sterling Doiron

Security Level: Email, Account Authentication (None)

Signature

Signed by:

 Sterling Doiron
 4C537C52B586437...

Signature Adoption: Pre-selected Style

Using IP Address: 71.169.188.88

Timestamp

Sent: 08/25/2025 | 10:10

Viewed: 08/25/2025 | 10:10

Signed: 08/25/2025 | 10:10

Freeform Signing

Electronic Record and Signature Disclosure:

Not Offered via Docusign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

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Agent Delivery Events

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Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Sent

Hashed/Encrypted

08/25/2025 | 10:10

Certified Delivered

Security Checked

08/25/2025 | 10:10

Signing Complete

Security Checked

08/25/2025 | 10:10

Completed

Security Checked

08/25/2025 | 10:10

Payment Events

Status

Timestamps