

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		Maine State Prison	
Department Contract Administrator or Grant Coordinator:		Robert Walden	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 35,985.04	Advantage CT / RQS #:	RQS 03B 20210708*0023 BPO 03B 20210716*0023
CONTRACT	Proposed Start Date:	7/1/21	Proposed End Date: 6/30/22
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:		Warren Sanitary Dist, Warren, Maine	
Brief Description of Goods/Services/Grant:		to pay sanitation department invoices	

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

	A. Competitive Process		G. Grant
X	B. Amendment		H. State Statute/Agency Directed
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

- Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.**

A written agreement was made with the Warren Sanitary District when the Maine State Prison facility was constructed. The services provided (wastewater treatment) are only available in Warren through the Warren Sanitary District.

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PART III: SUPPLEMENTAL INFORMATION

2. Provide a brief justification for the selected vendor to supplement the response in Part II.

At this time, we are unaware of any other resources available.


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

The agreement was created in 2001. The Department of Corrections along with the Bureau of General Services negotiated all the services and associated fees. Please see the written agreement dated July 19, 2001.

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

Currently there are no potential opportunities know for a new vendor.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
Printed Name:	<i>Randal A. Liberty</i>	Date:	<i>090821</i>
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> <i>Kathy Paquette</i>		
Printed Name:	<small>41C2BA36FAF44CD...</small> Kathy Paquette	Date:	9/9/2021