



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF 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 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 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:		Sherrill L. Hallett, Contract Grant Specialist		
(If applicable) Department Reference #:		23-012		
Amount: (Contract/Amendment/Grant)	\$ 188,401.97	Advantage CT / RQS #:	CT 15A202208120*0462	
CONTRACT	Proposed Start Date:	9/1/2022	Proposed End Date:	9/1/2023
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:		LoCurrent Systems, LLC 3522 County Highway 11 Cooperstown NY 13326		
Brief Description of Goods/Services/Grant:		Electronic Security replacement of compromised parts		

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

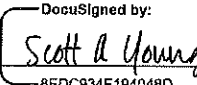
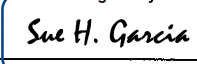
Please respond to ALL of the questions in the following sections.

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 access control system located at the AASF has failed and is unrepairable. This system will need to be replaced as soon as possible. I (Randy Bean, Electronic Security Manager) will have LoCurrent provide the department with the materials and personnel to assist with the replacement parts and programs. This will use the funds remaining from FY 22. The contract will be for the amount of \$188,401.97
2.	Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.
	The Galaxy Access Control System is used in many facilities throughout the Maine Army National Guard. It safeguards personnel and protects millions of dollars in assets at the Aviation Readiness Center in Bangor. It is a proprietary system, requiring factory-certified technicians to install and repair its many components. This access control system is validated and mandated for use by the National Guard Bureau. Should this system fail, there are no Galaxy technicians available in Maine. Furthermore, there is a unique set of installation/ security guidelines specific to the access control system operating on the Department of Defense computer network, which LoCurrent is qualified to perform. As recommended by National Guard Bureau, LoCurrent LLC, is currently installing Galaxy Access Control Systems for the United States Army Reserve, from Maine to West Virginia. Personnel have been vetted for security risks, have been factory trained and certified, and know the Department of Defense network operating protocols.
3.	Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
	The cost is set based on the industry standard labor rate, cost of material, travel and lodging. LoCurrent is able to provide the lowest cost due to less travel being the closest of the authorized vendors
4.	Describe the plan for future competition for the goods or services.
	Look for other vendors that can work can install the Galaxy Control System.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> No – If No, proceed to Part V.	

PART V: APPROVALS	
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Procurement Justification Form (PJF)

The signatures below indicate approval of this procurement request.			
Signature of requesting Department's Commissioner (or designee):	DocuSigned by:  <small>8EDC934F194046D</small>		
Typed Name:	Deputy Commissioner, Scott Young	Date:	25 August 2022
Signature of DAFS Procurement Official:	DocuSigned by:  <small>E5DB92AC0F8D490...</small>		
Typed Name:	Sue H. Garcia	Date:	8/30/2022