



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:	Department of Marine Resources, Bureau of Public Health		
Department Contract Administrator or Grant Coordinator:	Jill MacLeod/Angela Hopkins		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 99,679.52	Advantage CT / RQS #:	13A 2022090100000000305
CONTRACT	Proposed Start Date:	8/30/2022	Proposed End Date: 10/30/2022
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:	Agilent		
Brief Description of Goods/Services/Grant:	HPLC-PCOX system to expand shellfish testing capabilities in Eastern Maine		

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.

A high-performance liquid chromatography system that allows for analysis of shellfish samples for Paralytic Shellfish Poisoning (PSP) is needed in Eastern Maine. The time from sample collection to analysis result is three to four days, but with a system on location in Lamoine that could be decreased to one or two days. This would result in faster decision-making concerning shellfish harvesting, further protecting public health and providing more rapid information dissemination for the shellfish industry.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

We have a software license for Agilent's drivers and data analysis packages that is capable of running our current system in Lamoine in addition to these new modules for a PSP analysis workflow. We would like to optimize current lab space by using the existing computer as well as utilize the available software for running the new analysis.

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

The cost is reasonable and comparable to other manufacturers with systems that provide similar specifications.

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

These systems are upgraded, and new methods are introduced for analysis of shellfish tissue regularly. Future purchases for these methods will be assessed if/when the new method will be utilized in this laboratory.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Patrick Keliher, Commissioner	Date:	

Signature of DAFS Procurement Official:	DocuSigned by: <i>Justin Franzose</i>		
Typed Name:	AEEED9C7B3A8044E... Justin Franzose	Date:	9/2/2022