



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:		MEDMR/BMS/Ecology and the Environment	
Department Contract Administrator or Grant Coordinator:		Rebecca Peters / Marge Morissette	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ \$58,450	Advantage CT / RQS #:	13A 2022072000000000118
CONTRACT	Proposed Start Date:	7/15/2022	Proposed End Date: 9/15/2022
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:		Simrad/Kongsberg 19210 33 rd Ave West, Suite A Lynnwood, WA 98036	
Brief Description of Goods/Services/Grant:		Purchase of a Simrad Trawl System for trawl net measurements during trawl survey in the wind energy area.	

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 trawl monitoring system is needed for monitoring the performance of the trawl net during the trawl survey in the proposed research array. This system will provide data on the opening of the net, wing spread, door spread, and bottom contact which is needed to make sure the net is performing consistently during every tow. This system is also needed to determine if any fixed gear is encountered during our tows. Being able to monitor the spread of the net will allow us to see if any object causes significant changes to the net spread during our tows, which then allows us to haul the net up before any damage is done to our gear and any fixed gear. Using this system will also allow us to collect data to compare net performance to the gear used by the MENH Inshore Trawl Survey. This will allow for additional investigations into impacts of wind energy development on marine resources

The project this product supports is a new priority from the legislature and governor's office, and we will not be able to answer the questions being asked without this product.

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

This provider is experienced in the manufacturing and support of net monitoring systems. Additional surveys, like The Virginia Institutes of Marine Science's NEAMAP and Massachusetts Department of Marine Fisheries trawl survey, use this equipment and recommend this company and their equipment. This vendor was selected due to the recommendations from other surveys that use these systems. Currently we have a net monitoring system from a different company who doesn't provide the support we require and the equipment breaks down every survey. With no support the equipment is near impossible to fix, and we do not want to continue using their products. In addition, the other company is located in Canada and shipping the sensors back to get serviced is difficult where this selected vendor is located in the United States with representatives on the east coast who can service equipment.

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

The vendor provides a significant government discount for this equipment.

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

If more companies become available in a reasonable distance from the state of Maine and who offer support and service in the United States we will discuss fostering competition.

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


Does this request utilize ARPA/MJRP funds?

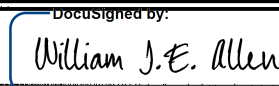
Yes – If Yes, please attach the approved Business Case(s).

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:	7/25/22

Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> 		
Typed Name:	<small>2D5B6E39F57E44A...</small> William J.E. Allen	Date:	9/8/2022

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