

**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:		DHHS/Maine CDC/HETL	
Department Contract Administrator or Grant Coordinator:		Chris Moiles/ Stacy Martin	
(If applicable) Department Reference #:		CD0-23-5461	
Amount: (Contract/Amendment/Grant)	\$ 5,662.80	Advantage CT / RQS #:	RQS 10A 20220707*065
CONTRACT	Proposed Start Date:	05/01/2022	Proposed End Date: 9/30/2022
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:		Clean Harbors Environmental Services, Inc. Braintree, MA	
Brief Description of Goods/Services/Grant:		Removal of Hazardous Waste	
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.

Mandatory Hazardous Waste Disposal from the DHHS Health & Environmental Testing Laboratory. Clean Harbor minimizes waste governed by RCRA regulations reducing the waste stream at Maine's Health and Environmental Testing Laboratory (HETL) through interpretation and providing guidance on waste management. The vendor conducts pick up services of hazardous waste in large quantities of greater than five gallons, which is needed at HETL. The hazardous waste disposal ranges from PCBs to cyanides. This vendor assists in the recycling of chemicals such as acetone, formamide, ketone, chloride, isopropyl alcohol, and methyl ethyl. This is to pay for an invoice (1004149981) for services that have been performed

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

The vendor was chosen because they are located in Maine and can assist in a timely clean-up shall the lab need assistance in a spill of a chemical nature.

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

The price is based upon standard rate for this service by the Provider.

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

The department does not intend to RFP this service at this time.

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:

Date:

10-Aug-22

Signature of DAFS Procurement Official:

Typed Name:

Martha Verhille

Date:

9/19/2022