

**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.

<b>PART I: OVERVIEW</b>				
Department Office/Division/Program:		DEPT OF EDUCATION – Education In The Unorganized Territories		
Department Contract Administrator or Grant Coordinator:		Gary Lewis		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 14,500.00	Advantage CT / RQS #:	CT 05C20210806*285
CONTRACT	Proposed Start Date:	Click or tap to enter a date.	Proposed End Date:	Click or tap to enter a date.
AMENDMENT	Original Start Date:	<b>9/1/2021</b>	Effective Date:	9/1/2022
	Previous End Date:	<b>8/31/2022</b>	New End Date:	8/31/2023
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Maxine Caler 62 Caler Rd., Centerville, ME 04623 <a href="mailto:mummamc1@yahoo.com">mummamc1@yahoo.com</a> <b>VC0000182406</b>		
Brief Description of Goods/Services/Grant:		Student transportation for 1 UT Centerville Twp student. RFP#201907119 anticipated an annual award through AY2023. There was 1 unaccepted high cost response. This qualified provider is willing to continue on an annual basis at this time.		

<b>PART II: JUSTIFICATION FOR VENDOR SELECTION</b>			
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 checked="" 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.

Student's residing in the unorganized territories will be provided transportation services as identified by statute. It is not cost effective to place a bus and driver in this remote location to transport 1 student. Response to RFP#201907119 was ineffective with only 1 bidder submitting a quote of \$62,625.00 per year for 5 years. The EUT reaches out to and is willing to contract with any willing and qualified, certified licensed provider to perform the necessary services at a fair and reasonable cost.

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

The EUT reaches out to and is willing to contract with any willing and qualified provider to perform the necessary services at a fair and reasonable. It is not cost effective to place a State bus and driver in this remote location to transport 1 student. The EUT did issue an RFP for these service, RFP#201907119, but response to it was low with only one transportation provider company bidding a cost of \$62,625.00 per year for 5 years. The EUT has located an individual qualified as a transportation provider at a significantly lower cost.

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

RFP 201907119 response bid would cost \$62,625.00 per year for one student or \$357.86/day  
EUT provided bus and driver would cost an estimated \$56,000.00 per year or \$320/day for one student  
Individual private transport for one student would cost \$14,500.00 or \$82.86/day.

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

The EUT continually inquires, coordinates and collaborates with local area school districts as well as other transportation providers in order to gain information in order to acquire willing providers who are qualified and/or already providing services in other local districts.

**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:

Daniel A. Chuhta

Date:

7/21/2022

DocuSigned by:

*Michelle Fournier*

066BBD96EE5347F...

Signature of DAFS Procurement Official:			
Typed Name:	Michelle Fournier	Date:	9/21/2022


### Certificate Of Completion

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Subject: Please DocuSign This Document	
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Document Pages: 3	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator: Daniel A. Chuhta Daniel.Chuhta@maine.gov
Envelopeld Stamping: Disabled	IP Address: 64.207.219.71
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Daniel A. Chuhta Daniel.Chuhta@maine.gov Deputy Commissioner Maine Department of Education Security Level: Email, Account Authentication (None)	Sent: 7/21/2022 1:37:11 PM Viewed: 7/21/2022 1:37:19 PM Signed: 7/21/2022 1:38:23 PM Freeform Signing
	
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<b>Certified Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Witness Events</b>	<b>Signature</b>	<b>Timestamp</b>
<b>Notary Events</b>	<b>Signature</b>	<b>Timestamp</b>
<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Envelope Sent	Hashed/Encrypted	7/21/2022 1:37:11 PM
Certified Delivered	Security Checked	7/21/2022 1:37:19 PM
Signing Complete	Security Checked	7/21/2022 1:38:23 PM
Completed	Security Checked	7/21/2022 1:38:23 PM
<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>