

## PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW							
Department Office/Division/Program:			Department of Administrative and Financial Services (DAFS) Bureau of General Services (BGS)				
Department Contract Administrator or Grant Coordinator:			Brian Keezer				
(If applicable) Department Reference #:			N/A				
Agency Department Code: 18A			Advantage CT	/ RQS #:			
Amount: \$100,00			00				
CONTRACT	Proposed/Original Start Date:		1/3/2025		Recent End Date:		1/3/2029
AMENDMENT	New Effective Date:				New End Date (if Applicable):		
GRANT Project Start Date:				Grant Start Date: Grant End Date:			
Vendor/Provider/Grantee Name,		-	RothIAMS	VC0000256755			
City, State:			360 Central Ave. Suite 8000 St. Petersburg, FL 33701				
Brief Description of Goods/Services/Grant:			Master Agreement for Facility Condition Assessment & Planning Services				
Goods/Services/Grant:			Assessment & Planning Services				

PART II: JUSTIFICATION FOR VENDOR SELECTION					
Check the box below for the justification(s) that applies to this request. (Check all that apply.)					
$\boxtimes$	A. Competitive Process		G. Grant		
	B. Amendment		H. State Statute/Agency Directed		
$\boxtimes$	C. Single Source/Unique Vendor		I. Federal Agency Directed		
	D. Proprietary/Copyright/Patents		J. Willing and Qualified		
	E. Emergency		K. Client Choice		

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	F. Higher Education Cooperative Project		L. Other Authorization	
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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.

This master agreement is to provide facility condition assessments and planning services for State of Maine owned buildings.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

The vendor was chosen through a multi-state solicitation through Sourcewell. We are utilizing Sourcewell's Master Agreement #102424-RTH. This would have been considered competitive procurement; however, we did not publish the solicitation in the Kennebec Journal as required by Chapter 110 rules. RothIAMS was under a previous Master Agreement (#MA 18P 22091400000000000054) with the State that expired on 3/24/25 for the same type of work.

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

Based off the Sourcewell Master Agreement, RothIAMS is offering 22% off their standard rate for professional services, 50% off their standard rate for their administration fees and 20% off standard costing for software solutions. These are discounts the State would not be privy to without participating in this multistate cooperative effort.

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

There'll be another cooperative solicitation through Sourcewell once the current one expires that the State of Maine will be participating in.

## PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP) Does this request utilize ARPA/MJRP funds? ☐ Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s). ☐ Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies. ☑ No – If No, proceed to Part V.

## PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS <u>Title 5, §18</u> and <u>§18-A</u>, in harmony with MRS <u>Title 17, §3104</u>.

☑ The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS							
Governor/Department Commissioner or Designee							
The signature below indicates approval of this procurement request.							
Signature of requesting Department's Commissioner (or designee):	Brown Regar						
Typed Name:	Brian Keezer, BGS Director	Date:	9/17/2025				
Additional signature required <b>ONLY if box E (Emergency) is selected in PART II</b> . The signature below indicates approval by the Department's Commissioner, or the <u>designee specifically authorized to approve emergency procurement requests</u> .  Signature of requesting Department's Commissioner							
(or designee): Typed Name:		Date:					
**OSPS Section Only**							
Signature of DAFS Procurement Official:	Signed by: William J.E. Allen						
Typed Name:	2D5B6E39F57E44A William J.E. Allen	Date:	9/17/2025				

NOI 0920250866 09/18/2025 - 09/24/2025