



## 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:                     |                               | DEP, Water Bureau, Division of Water Quality Management                                                             |                                |           |
| Department Contract Administrator or Grant Coordinator: |                               | Robert Hartley                                                                                                      |                                |           |
| (If applicable) Department Reference #:                 |                               |                                                                                                                     |                                |           |
| Agency Department Code:                                 | 06A                           | Advantage CT / RQS #:                                                                                               | 20231109*1361                  |           |
| Amount:<br>(Contract/Amendment/Grant)                   |                               | \$25,000                                                                                                            |                                |           |
| CONTRACT                                                | Proposed/Original Start Date: | 1/6/2022                                                                                                            | Proposed/Most Recent End Date: | 10/2/2026 |
| AMENDMENT                                               | New Effective Date:           | 8/13/2026                                                                                                           | New End Date (if Applicable):  | 10/2/2026 |
| GRANT                                                   | Project Start Date:           |                                                                                                                     | Grant Start Date:              |           |
|                                                         | Project End Date:             |                                                                                                                     | Grant End Date:                |           |
| Vendor/Provider/Grantee Name, City, State:              |                               | Town of Washburn, Washburn, ME                                                                                      |                                |           |
| Brief Description of Goods/Services/Grant:              |                               | Design/Construction/Installation of Installation of Septic Systems projects funded under MJRP Business Case S.70.1. |                                |           |

| PART II: JUSTIFICATION FOR VENDOR SELECTION                                                        |                                         |                          |                                  |
|----------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------|----------------------------------|
| Check the box below for the justification(s) that applies to this request. (Check all that apply.) |                                         |                          |                                  |
| <input checked="" 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 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 checked="" type="checkbox"/>                                                                | E. Emergency                            | <input type="checkbox"/> | K. Client Choice                 |
| <input type="checkbox"/>                                                                           | F. Higher Education 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 DEP administers the Wastewater Construction Grant Program (CG) as authorized under MRS Title 38, Ch. 3, §411 and §412, that is funded through periodic bond issues approved by voters and in this case by the American Recovery and Reinvestment Act (ARPA). This program is essential to the Department's responsibilities to protect and improve the waters of the State, as mandated by Maine statute.

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.

These grants are given to municipalities or quasi-municipal organizations for projects (repair or replacement of septic systems) to protect and improve the waters of the State, as authorized under MRS Title 38, Ch. 3, §411 and §412. The grantees are selected through a competitive process. The Department notifies municipalities via e-mail of the available grant funding for these projects and posts the announcement on the Department's website and the Maine Municipal Association's website. Municipalities submit potential projects that can be funded. The projects are reviewed by Department staff and ranked for environmental importance/benefit in accordance with Department Rules, Chapter 592. Grant awards are based on this process.

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

The Department awards the grant to the Grantee based on an estimated cost of the project(s) (repair or replacement of septic system(s)). The projects are competitively bid by the Grantee. As these projects are typically failing septic systems, they are considered emergency funding needs.

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

State grants for this funding is awarded as in Section 2. Projects will continue to be competitively bid by the Grantee.

### 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) or (026) – 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 [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

☒ 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

1. The signature below indicates approval of this procurement request.

Signature of requesting  
Department's Commissioner  
(or designee):

*David R. Madore for Melanie Loyzim*

09/02/2026

Typed Name:

**Melanie Loyzim, Commissioner**

Date:

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting  
Department's Commissioner  
(or designee):

*Sherrie Kelley*

09/01/2026

Typed Name:

**Sherrie Kelley**

Date:

**\*\*OSPS Section Only\*\***

Signature of DAFS  
Procurement Official:

Signed by:

**Sterling Doiron**

Typed Name:

4C537C52B586437...  
Sterling Doiron

Date:

9/10/2026

## Certificate Of Completion

Envelope Id: A62C35EA-AA6F-8DB8-82A4-8E35300F6279

Status: Completed

Subject: Complete with Docusign: Washburn SCG ARPA Amend\_PJF (1).pdf

Source Envelope:

Document Pages: 3

Signatures: 1

Envelope Originator:

Certificate Pages: 1

Initials: 0

Sterling Doiron

AutoNav: Disabled

77 State House Station

Envelopeld Stamping: Disabled

111 Sewall Street

Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Augusta, ME 04333

Sterling.Doiron@maine.gov

IP Address: 71.169.188.88

## Record Tracking

Status: Original

Holder: Sterling Doiron

Location: DocuSign

9/10/2026 9:37:11 AM

Sterling.Doiron@maine.gov

## Signer Events

Sterling Doiron

Sterling.Doiron@maine.gov

Sterling Doiron

Security Level: Email, Account Authentication  
(None)

## Signature

Signed by:

**Sterling Doiron**

4C537C52B586437...

Signature Adoption: Pre-selected Style

Using IP Address: 71.169.188.88

## Timestamp

Sent: 9/10/2026 9:37:15 AM

Viewed: 9/10/2026 9:37:21 AM

Signed: 9/10/2026 9:37:35 AM

Freeform Signing

## Electronic Record and Signature Disclosure:

Not Offered via Docusign

## In Person Signer Events

## Signature

## Timestamp

## Editor Delivery Events

## Status

## Timestamp

## Agent Delivery Events

## Status

## Timestamp

## Intermediary Delivery Events

## Status

## Timestamp

## Certified Delivery Events

## Status

## Timestamp

## Carbon Copy Events

## Status

## Timestamp

## Witness Events

## Signature

## Timestamp

## Notary Events

## Signature

## Timestamp

## Envelope Summary Events

## Status

## Timestamps

Envelope Sent

Hashed/Encrypted

9/10/2026 9:37:15 AM

Certified Delivered

Security Checked

9/10/2026 9:37:21 AM

Signing Complete

Security Checked

9/10/2026 9:37:35 AM

Completed

Security Checked

9/10/2026 9:37:35 AM

## Payment Events

## Status

## Timestamps