



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 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:	Secretary of State, Bureau of Motor Vehicles		
Department Contract Administrator or Grant Coordinator:	Cathie Curtis, Deputy Secretary of State		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 37,088.00	Advantage CT / RQS #:	20241007000000000542
CONTRACT	Proposed Start Date:	10/7/2024	Proposed End Date: 2/28/2025
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:	NOVA Partners 204 State St. PO Box 457 Gorham, ME 04038		
Brief Description of Goods/Services/Grant:	Emergency order of MVR 3E registration forms		

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 checked="" type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice

<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	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.

We put the MVR 3E forms out to bid. The vendor awarded the bid can not deliver before our current inventory is depleted. We are requesting an emergency order with a vendor who can deliver sooner than the awarded vendor. This will bridge the gap between when we anticipate to deplete our current inventory and when the awarded vendor can deliver.

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

We selected this vendor to be the sole source for this emergency request because they were the second lowest bidder and they also indicated they could deliver within 30 days.

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

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

We are creating a master agreement for these forms so going forward they will be purchased via the competitive bid process.

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 Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

The requesting department signatory understands and acknowledges Maine's Conflict of Interest statutes.

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Bruno Inacio	Date:	10/7/2024
Signature of DAFS Procurement Official:	<div data-bbox="568 745 828 850" style="border: 1px solid black; padding: 5px;"> <p>DocuSigned by: <i>Martha Verhille</i> <small>891CE7A1493D45B...</small></p> </div>		
Typed Name:	Martha verhille	Date:	10/8/2024