



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:		Inland Fisheries and Wildlife/Bureau of Warden Service/Wildlife PArk		
Department Contract Administrator or Grant Coordinator:		Jason Luce		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)	\$ 6212.60	Advantage CT / RQS #:	09A-2021105-513	
CONTRACT	Proposed Start Date:	11/4/2021	Proposed End Date:	11/18/2021
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:		Miller Refrigeration Co., Inc		
Brief Description of Goods/Services/Grant:		Repairs to walk in freezer		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before 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

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.

A Miller Refrigeration Tech did a quarterly inspection (09/27) and found that the compressor for the condensing unit has failed. They said that due to the age of the condensing unit that there is not a replacement compressor unit for it. Miller Refrigeration has supplied a quote to fix it. We

On 10/21, I met with Howie Powell from the Wildlife Park and talked about the repairs that would be needed. I spoke with Deb Jacques and she advised for us to get 3 quotes for to fix it.

Today (11/4), I spoke with Howie Powell and he advised that the freezer is now failing and that it is starting warm up inside. We do not have time to get 3 quotes.

This is of concern as the freezer contains evidence seized for hunting violations as well as food for the animals at the Wildlife Park.

I am requesting permission to have Miller Refrigeration do the work as it needs to be done in a timely manner so that food and evidence is not lost.

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

Miller Refrigeration has had a contract to fix the freezer for several years and has been doing routine inspections of the freezer. They are familiar with it and are local and readily available if needed.

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

This freezer is owned by both the Warden Service and the Wildlife Park. This bill will be split and paid in equal shares.

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

The contract with Miller Refrigeration has expired. We will be working with Bureau of Purchases to establish a new contract for routine inspections and repairs

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 VI

PART V: APPROVALS

Signature of requesting Department's Commissioner (or designee):	By signing below, I signify that I approve of this procurement request. 11/16/21		
Printed Name:	Timothy Penbody	Date:	11/4/21 11/16/21
Signature of DAFS Procurement Official:	DocuSigned by: William J.E. Allen		
Printed Name:	2D5B6E39F57E44A... william J.E. Allen	Date:	11/18/2021

NOI 1120210926 11/18/2021 - 11/24/2021