



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.


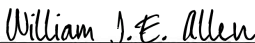
PART I: OVERVIEW				
Department Office/Division/Program:		MDOT - Traffic		
Department Contract Administrator or Grant Coordinator:		Harold Tower – Traffic Transportation Crew Supervisor		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ \$37,350	Advantage CT / RQS #:	RQS2022101300000000518
CONTRACT	Proposed Start Date:	12/1/2022	Proposed End Date:	11/30/2025
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:		Safety Base USA, Inc -VC0000191125 1036 Waverly St Winnipeg, MB R3T OP3 Canada		
Brief Description of Goods/Services/Grant:		Break away assemblies for highway lighting pole repair.		

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 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.	We will use this agreement to purchase replacement parts for poles that need repair due to accidents. Or for corrosion repair of bases when applicable.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	Safety Base USA is the only company that provides the specific type of break away replacement system that MaineDOT needs to repair its damaged highway light poles. The reaction plate not only protects the anchor bolts and allows for the uniform distribution of forces amongst couplers, but it also allows for retrofitting to bases of any size.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Safety Base USA Ltd is the only company that we have found that has this type of system. So it is not comparable to any other system. These units will be purchased to replace parts due to corrosion or repair and replace existing poles as needed. C7/RP10/S7 Unit price for 2021 through 2022 was \$375.00 each. C7/RP10/S7 Unit price for 2022 through 2023 will be \$415.00 each I believe this to be a fair price mark up due to inflation is prices of materials used.
4. Describe the plan for future competition for the goods or services.	Annually search for any other company that can offer the same or at least another equally qualified replacement system. And if another company is found offering this type of unit, we would request a quote from them.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> 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:	William Pulver, C.O.O	Date:	10-14-2022
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	2D5B6E39F57E44A... William J.E. Allen	Date:	11/1/2022