



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:	Maine Public Utilities Commission		
Department Contract Administrator or Grant Coordinator:	Harry Lanphear		
(If applicable) Department Reference #:	N/A		
Amount: (Contract/Amendment/Grant)	\$ \$50,000	Advantage CT / RQS #:	CT 65A 20220901*669
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	9/12/2022	Effective Date:
	Previous End Date:	8/31/2023	New End Date: 9/30/2023
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:	William Dunkel & Associates		
Brief Description of Goods/Services/Grant:	Rate Case depreciation consulting services.		

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 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 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.	Provider will assist the Commission with certain depreciation analysis related to a significant utility case involving two of Maine's largest utilities.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The Commission did not receive any acceptable responses to RFP 202202019, and therefore is contracting with a vendor we have used successfully in the past for similar depreciation work.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Providers costs were negotiated and are similar to other expert financial consulting rates in the utility industry.
4. Describe the plan for future competition for the goods or services.	The MPUC will issue an RFP if similar work is required in the future.

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:	Harry Lanphear, Administrative Director	Date:	10/25/2022
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	11/8/2022