



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:		MaineDOT / Project Development / Property Office	
Department Contract Administrator or Grant Coordinator:		Nicholas Dutil	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 30,600.00	Advantage CT / RQS #:	20241030000000000633
CONTRACT	Proposed Start Date:	11/16/2024	Proposed End Date: 11/16/2026
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:		Keystone Precision Solutions, Allentown, PA	
Brief Description of Goods/Services/Grant:		Trimble Business Center Annual Software License Fee 2-Year Term	

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.


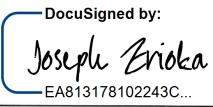
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
The Department needs to make biannual payments to acquire licenses for Trimble Business Center software users. If the licenses expire prior to payment being completed, the Department won't be able to keep the Trimble Business Center software up to date.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
Keystone Precision Solutions is the single source vendor for all Trimble hardware and software products that are supplied to MaineDOT.	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
Keystone is providing the Department with a significant discount on each license seat being acquired. Per the product quote, the Department is saving \$855 per Site and Field license, and \$1585 per Survey and Mapping license, for a total of \$55,500 in savings compared to list price over 2 years.	
4. Describe the plan for future competition for the goods or services.	
While MaineDOT is constantly evaluating new software platforms, Trimble Business Center will likely be an integral part of the Department's workflow for as long as MaineDOT utilizes Trimble hardware.	

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> 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:	William Pulver, C.O.O.	Date:	10-25-2024
Signature of DAFS Procurement Official:			
Typed Name:	Joseph Zrioka Director of IT Procurement	Date:	11/13/2024