



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 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:		Inland Fisheries and Wildlife / Wildlife / GRAM Section	
Department Contract Administrator or Grant Coordinator:		Jen Vashon and Diana Harper	
(If applicable) Department Reference #:			
Agency Department Code:	09A	Advantage CT / RQS #:	20251009*0783
Amount: (Contract/Amendment/Grant)	\$11,000.00		
CONTRACT	Proposed/Original Start Date:	1/5/2026	Proposed/Most Recent End Date: 3/27/2026
AMENDMENT	New Effective Date:		New End Date (if Applicable):
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		RAD Rentals, LLC Newburgh, ME	
Brief Description of Goods/Services/Grant:		Short-term housing rental for one employee and two contractors for winter field work for bear project	

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. Higher Education 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.

Housing is needed for our winter field crew for the bear project. In the past, we were able to provide bunk space in our Department headquarters and supplement with motels near our other more remote field sites as needed. Since our office relocation, bunk space is no longer available, and we are seeking alternative off-site housing.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

After research and contacting numerous individuals and companies with furnished rental housing available for a three-month period with rates that fall within the per diem, RAD Rentals was the only one willing to work with the State of Maine.

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

The negotiated rate falls well below the per diem lodging cost per night (\$110) for one room for each crew member (\$110/night x 3 crew members x 90 days = \$29,700). Three months (90 days) renting the house comes to \$11,000/90 days = \$122.22/night or \$40.74/night for each crew member).

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

In the future, we will continue to identify multiple potential housing options (motels, rental properties, etc.) to ensure that pricing is competitive.

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) or (026) – 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

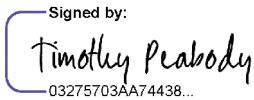
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

X The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 <small>Signed by: 03275703AA74438...</small>		
Typed Name:	Timothy Peabody	Date:	□ □ □ □ □ □ □ □ □ □

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	 <small>DocuSigned by: 891CE7A1493D45B...</small>		
Typed Name:	Martha verhille	Date:	11/18/2025

Certificate Of Completion

Envelope Id: D91B9565-46B8-4079-AEFE-B974FEEEE92B6	Status: Completed
Subject: PJF to sign: RAD Rentals 20251009_0783 PJF for bear housing	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 4	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Diana Harper
Time Zone: (UTC-08:00) Pacific Time (US & Canada)	353 Water Street
	41 SHS
	Augusta, ME 04333-0041
	diana.harper@maine.gov
	IP Address: 198.182.163.121

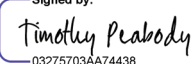
Record Tracking

Status: Original	Holder: Diana Harper	Location: DocuSign
10/9/2025 9:38:21 AM	diana.harper@maine.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Inland Fisheries and Wildlife	Location: Docusign

Signer Events

Timothy Peabody
 timothy.e.peabody@maine.gov
 Deputy Commissioner
 Security Level: Email, Account Authentication (None)

Signature

Signed by:

 03275703AA74438...
 Signature Adoption: Pre-selected Style
 Using IP Address: 198.182.163.113

Timestamp

Sent: 10/9/2025 9:39:51 AM
 Viewed: 10/10/2025 4:41:32 AM
 Signed: 10/10/2025 4:42:19 AM

Electronic Record and Signature Disclosure:
 Accepted: 10/10/2025 4:41:32 AM
 ID: 0cc68cb5-6cc4-463a-84e0-3a7598304e47

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	10/9/2025 9:39:51 AM
Certified Delivered	Security Checked	10/10/2025 4:41:32 AM
Signing Complete	Security Checked	10/10/2025 4:42:19 AM
Completed	Security Checked	10/10/2025 4:42:19 AM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure