



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:		Marine Resources/Bureau of Marine Patrol	
Department Contract Administrator or Grant Coordinator:		Captain Matt Talbot	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 5470.00	Advantage CT / RQS #:	13A 20211130000000000592
CONTRACT	Proposed Start Date:	11/10/2021	Proposed End Date: 12/10/2021
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:		Horizon Aircraft Services LLC 1156 Carmel Road North Hampden, ME 04444	
Brief Description of Goods/Services/Grant:		Emergency Aircraft Repairs	

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 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.

The Department operates and maintains a single aircraft asset for coastal law enforcement and search and rescue operations. During a routine required FAA aircraft inspection, needed repairs to the aircraft were identified including repair to the horizontal stabilizer. The items identified during the inspection resulted in the aircraft being deemed not airworthy until the repairs could be made.

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

The required repairs to the Department's aircraft were identified during a routine aircraft inspection and this expense was therefore unplanned. The Department provides coastal search and rescue operations with this aircraft and immediate repair was necessary for the aircraft to be available for service. The selected vendor's facility was onsite at the location of the inspection and the vendor is a licensed and qualified aircraft mechanic capable and willing to complete the necessary work. The Department has utilized the vendor's services in the past and whereas the plane was deemed not airworthy pending repair, it was in the Department's best interest to have the aircraft repaired on site.

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

The cost of this repair, although higher than initially expected, is in line with industry norms and was the most reasonable option for the necessary work whereas the vendor was onsite and did not require the Department to incur the added cost of having the plane transported to another facility. The aircraft repair work was invoiced on two invoices # 21121 and 21122 totaling \$5,470.00

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

The Department routinely utilizes the RQS and RFP processes for procurement of goods and services over \$5000.00 and will continue to do so as necessary.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

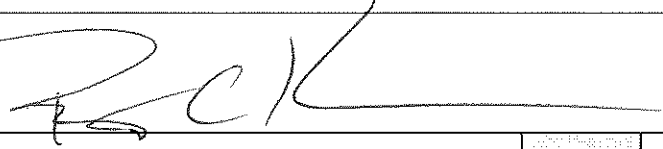
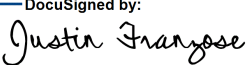
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Patrick Keliher, Commissioner	Date:	11/29/21
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	Justin Franzose	Date:	11/30/2021