



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.


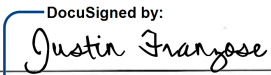
PART I: OVERVIEW				
Department Office/Division/Program:		Department of Administrative and Financial Services, Bureau of General Services		
Department Contract Administrator or Grant Coordinator:		Deane Rykerson, Division of Planning, Design and Construction		
(If applicable) Department Reference #:		3375		
Amount: (Contract/Amendment/Grant)		\$ 8900	Advantage CT / RQS #:	CT 18A 20211214*1538
CONTRACT	Proposed Start Date:	1/31/2022	Proposed End Date:	3/21/2022
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:		Northeast Civil Solutions, Inc. 381 Payne Road, Scarborough, ME 04074		
Brief Description of Goods/Services/Grant:		Complete Boundary Survey for Blaine House, 192 State St. Augusta, ME		

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.	Future planning and work at the Blaine House require a complete boundary survey to define scope of construction or alterations.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The vendor has provided partial surveys of the Blaine House and adjoining properties. The vendor would consolidate into a single document with new established survey markers.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Costs for the work of a licensed surveyor are within a typical range.
4. Describe the plan for future competition for the goods or services.	New surveys without existing information will be procured through an RFP process.

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):			12.20.21
Typed Name:	Elaine Clark	Date:	
Signature of DAFS Procurement Official:			
Typed Name:	AEEED9C7B3A8044E... Justin Franzose	Date:	12/21/2021