



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:		Guy Ladd	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ \$8,982.44	Advantage CT / RQS #:	RQS20241125000000000747
CONTRACT	Proposed Start Date:	11/24/2021	Proposed End Date: 10/20/2023
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:		KMEL Corp dba Keystone Precision Instruments Allentown, PA	
Brief Description of Goods/Services/Grant:		Trimble accessories and service.	

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.

This PJF is to correct any overdue payment owed for our land surveying equipment maintenance and purchasing of misc. land surveying supplies. Invoice 0221619-IN, 1/31/22, \$26.05; 0231932-IN, 12/15/22, \$150.00; 0219847-IN, 11/24/21, \$536.21; 0239007-IN, 8/8/23, \$562.50; 0241369-IN, 10/20/23, \$750.00; 0220431-IN, 12/14/21, \$2,488.00; 0231797-IN, 12/7/22, \$4,469.68; TOTAL: \$8,982.44.

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

Currently Keystone Precision Solutions is the single source vendor for all Trimble hardware and software products and services 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 Precision Solutions is the only company that can service our Trimble land surveying equipment and software.

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

We are putting similar items and services out to bid to reach out to more vendors.

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) – 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](#).

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:	11-19-2024
Signature of DAFS Procurement Official:	<div style="border: 1px solid black; padding: 2px;"> <small>DocuSigned by:</small>  <small>EA813178102243C...</small> </div>		
Typed Name:	Joseph Zrioka, IT Procurement Director	Date:	12/4/2024