



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

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:		Public Utilities Commission/ESCB	
Department Contract Administrator or Grant Coordinator:		Maria Jacques	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 3,296,358	Advantage CT / RQS #:	CT 65A 20190206*2244
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	3/11/2013	Effective Date:
	Previous End Date:	1/2/2025	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Consolidated Communications Augusta, Maine	
Brief Description of Goods/Services/Grant:		NG911 Services	

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 checked="" 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.

Consolidated Communications is the current vendor for NG911 services. There is a new contract with Consolidated to provide significant updates and new technology (CT 65A 20240402000000002694) which is due contractually obligated to cutover June 17, 2025. This extension bridges the gap from the existing system’s current end date of 1/2/2025 to the contractually required implementation date of the new system, June 17, 2025. If for some reason Consolidated does not achieve cutover and system acceptance by the end of June, financial penalties will be assessed per this amendment.

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

Consolidated holds the contract for this proprietary system.

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

There will be no change in rates already established by contract unless the vendor does not meet the contractual due date of the new system. If they miss that date progressive financial penalties in this amendment begin to be assessed.

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

There is no immediate plan to competitively bid this service as there is a replacement contract already in place.

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.

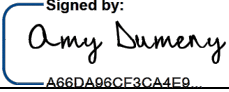
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

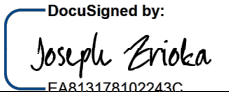
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

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):	 <p>Signed by: Amy Dumeny A66DA98CF3CA4E9</p>		
Typed Name:	Amy Dumeny, Administrative Director	Date:	12/16/2024

Signature of DAFS Procurement Official:	 <p>DocuSigned by: Joseph Zrioka EA813178102243C</p>		
Typed Name:	Joseph Zrioka, IT Procurement Director	Date:	12/13/2024