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 $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:	Defense, Veterans and Emergency Management			
Department Contract Administrator or Grant Coordinator:	Katherine St. Peter-Gunn			
(If applicable) Department Reference #:				
Agency Department Code:	15A	Advantage CT / RQS #:	20251103*1061	
Amount: (Contract/Amendment/Grant)	$63,990.00			
CONTRACT	Proposed/Original Start Date:	**11/20/2025**	Proposed/Most Recent End Date:	9/30/2027
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:	Mobile Fire LLC dba 139 Fire P.O. Box 364 Carlton, MN 55718			
Brief Description of Goods/Services/Grant:	Live Fire Training			

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
☐	A. Competitive Process	☐	G. Grant
☐	B. Amendment	☐	H. State Statute/Agency Directed
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed
☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☐	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	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 ARFF live fire trainer is an annual training requirement to conduct live fire burns for aircrafts per AFI 10-210 AC 150/5210-23 FAA. A trained technician is required to conduct the training.

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.

Mobile Fire is the sole source provider for mobile ARFF live fires throughout the country. They provide the technician and set up the trainer at our location. The cost savings of having the mobile ARFF trainer brought to our location is astronomical. It minimizes overtime of full-time personnel, and we are able to conduct the training over the weekend so that our Drill Status Guardsman can meet their requirements as well.

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

Mobile Fire has negotiated the current cost for the next two-year period with a savings of $10,000.00.

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

The Department will follow all the current OSPS rules at the time this contract expires. We anticipate sending out an RFP for bidding and following the competitive RFP process.

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.

☒ 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):	Signed by: Michelle Lenihan F3A3606E0A33464...		
Typed Name:	Michelle Lenihan Deputy Commissioner	Date:	11/26/2025
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:	DocuSigned by: Justin Franzose AEED9C7B3A8044E...		
Typed Name:	Justin Franzose	Date:	12/1/2025