



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF 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 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:		DAFS/MaineIT/Network Services	
Department Contract Administrator or Grant Coordinator:		Jason Box	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 13,858.00	Advantage CT / RQS #:	RQS 18B 2024052*1662
CONTRACT	Proposed Start Date:	5/25/2024	Proposed End Date: 5/24/2027
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:		Consolidated Communications Inc 5 Davis Farm Rd Portland, ME 04103	
Brief Description of Goods/Services/Grant:		100 Mbps Business Class Fiber Ethernet Services "FiberDirect" @ 270 Lyons Road, Sidney, ME 04330	

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 checked="" 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.

The State customer requires a business class internet line independent of the State's enterprise network. Consolidated Communications Inc. (CCI) is a suitable vendor with immediate infrastructure availability. Their "FiberDirect" service is a business-grade dedicated internet connection with transfer speeds quoted at 100 Mbps.

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

CCI is available to provide the necessary connection for the State customer at a lower cost than other products presented on the current CCI MA. Comparable products on the CCI MA would cost in excess of \$820/mo.

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

Pricing per CCI Proposal 54180. Total requested funds include an estimation for surcharges and fees not appearing in the per-month service proposal.

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

These services will be articulated in the next wide area network/State Bandwidth RFP and/or amended into the existing MA with CCI for internet services.

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

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?

Yes, the requesting Department understands and acknowledges [MRS Title 5, §18-A, 2.](#)

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Nicholas Marquis</i> A29C99359A37464...		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	5/21/2024
Signature of DAFS Procurement Official:	DocuSigned by: <i>Joseph Zrioka</i> EA813178102243C...		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	5/21/2024