



Schedule of Items

Item Description	VIN Number/ Equipment ID	Dispatch Center	Rates
Water Tender (Support) Type 2	1xp5db9x1pd333427	OR-NOC	Daily Rate \$1529/Day

**Vendor Information**

Company Name: bar 2s cattle company  
DUNS: 623111858  
Company Address:  
57101 saddle mountain road  
milton-freewater, Oregon, 97862-7628

Mailing Address: same as above

**Primary Contact:**

Name: scott sinclair  
Email: sinclair.scott@yahoo.com  
Daytime Phone: 5419106700  
Cell Phone: 5419106700  
Evening Phone: 5095294033  
Fax: 5095265567

Secondary Contact: none

**Discount Terms:**

none

**Small Business Status**

Small Business: Y  
HUBZone: N  
Service-Disabled Veteran-Owned Small Business: N  
8(a): N  
LSA Flag: N

**Supporting Documentation**

Has Workers Compensation Insurance: Y  
Workers Comp. Insurance Expiration Date: none  
Has sufficient employees: N  
Is registered in CCR: Y  
Has completed ORCA: Y



**Solicitation Year: 2010**  
**Resource Category**  
**Water Tender (Support), Type 2**

Please complete the required fields, which are indicated by an asterisk (\*) and highlighted in yellow.

*For Agreement Phase Only:*

Withdraw this resource       Replace this VIN Number

From this drop-down list, select the VIN Number that you wish to withdraw or select the VIN Number that you wish to replace with the new VIN Number that you provide on this form.

**1. Equipment Description**

License # \*  State \*  (Where the license was issued)

VIN Number \*  Equipment ID \*

Make \*  Model \*

Year \*  DOT Inspection Issue Date \*  Insurance Policy Expiration Date \*

**2. Equipment Location**

City \*  State \*  Zip Code \*  -

Dispatch Center \*  Latitude  Longitude

*Latitude and Longitude are for future use.*

**3. Equipment Attributes**

Capacity \*  gallons hauled (water) All-Wheel Drive \*

Spray Bar Configuration \*  Suspension \*

**4. Rates**

Daily Rate \* \$

Do you have enough employees for a double shift?  Yes  No

**5. Contact Information**

Complete this section **ONLY** if the contact information is different than what is listed on the Vendor Company Information form.

First Name  Last Name

Daytime Phone ( ) -  Cell Phone ( ) -  Evening Phone ( ) -  FAX ( ) -

E-mail Address

First Name  Last Name

Daytime Phone ( ) -  Cell Phone ( ) -  Evening Phone ( ) -  FAX ( ) -

E-mail Address