

INCIDENT BLANKET PURCHASE AGREEMENT (IBPA) OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER	
2. CONTRACT NO. AG-04H1-B-10-6003		3. AWARD/EFFECTIVE DATE SIGNED on 06/30/2010	4. This agreement was modified on the date in Block 3		5. SOLICITATION NUMBER
7. FOR SOLICITATION INFO CALL:		a. NAME SIGNED by Lucy Barton		b. TELEPHONE NUMBER 541-471-6746	8. OFFER DUE DATE/LOCAL TIME
9. ISSUED BY RO National Forest 333 SW 1st Avenue PO Box 3623 Portland, OR 97208-3623			CODE: 04H1	10. THIS ACQUISITION IS __ UNRESTRICTED OR __ SET ASIDE: % FOR <input checked="" type="checkbox"/> SMALL BIZ EMERGING SMALL __ BIZ NAICS: HUBZONE SMALL 115310 __ BIZ SIZE SERVICE-DISABLED __ 8(a) STANDARD: VETERAN-OWNED \$17.5MM SMALL BUSINESS	
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED __ SEE SCHEDULE		12. DISCOUNT TERMS		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)	13b. RATING 14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> RFQ __ IFB __ RFP
15. DELIVER TO			CODE:	16. ADMINISTERED BY	
17a. CONTRACTOR/OFFEROR Vendor name: J & P Bell Industries, Inc DBA: Silver Eagle Charters Street address: P.O. Box 6498 City: Spokane State: WA Zip: 99217 Contact name: Patricia Bell Email address: pbsilver@msn.com Primary phone: 509-487-6903 Cell phone: 509-994-7297 Alternate phone: 509-483-6250 Fax: 509-487-0611 TTY phone: Duns Number: 007931111			CODE:	18a. PAYMENT WILL BE MADE BY See attached supplemental provisions	
__ 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED __ SEE ADDENDUM		
19. ITEM NO.	20-24. SCHEDULE OF SUPPLIES/SERVICES (See attached schedule below. The following are included by reference.) A. General and Pacific Northwest Interagency Supplemental General Provisions which apply to this Agreement are attached. B. Wage Determination #1995-0221 Revision 21 dated 3/30/09 is attached and applicable to this Agreement. C. The effective date of this agreement is from the date in Block 31c to May 31st, 2011.				
25. ACCOUNTING AND APPROPRIATION DATA				26. TOTAL AWARD AMOUNT	
<input checked="" type="checkbox"/>	27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED.			<input checked="" type="checkbox"/>	ARE
<input checked="" type="checkbox"/>	27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED.			<input checked="" type="checkbox"/>	ARE
__	ARE ATTACHED.			__	ARE NOT ATTACHED
__	ARE NOT ATTACHED.			__	ARE NOT ATTACHED
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <input checked="" type="checkbox"/> COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED				29. AWARD OF CONTRACT: REF. _____ OFFER DATED _____. YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: _____	
30a. SIGNATURE OF OFFEROR/CONTRACTOR /S/Patricia Bell				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) /S/Lucy Barton	
30b. NAME AND TITLE OF SIGNER (Type or print): Patricia Bell		30c. DATE SIGNED 06/30/2010	31b. NAME OF CONTRACTING OFFICER (Type or print) Lucy Barton		31c. DATE SIGNED 06/30/2010

1 Type: **Bus** , Bus, Coach - 39+ Passenger
 Description: **This category covers coach, shuttle, and crew bus.**
 VIN: **020**
 Year: **1987**
 Make: **Mcl - #20**
 Model: **9**
 License Number: **49373PR**
 License State: **WA**
 Zip: **99217**
 Wet: **W**
RATES
 Rate name: **Mileage**
 Rate type: **Mile**
 Rate description: **Mileage Rate**
 Rate: **\$3.75**

 Rate name: **Daily Rate**
 Rate type: **Daily**
 Rate description: **Daily Guarantee**
 Rate: **\$975.00**

COMMENTS
 VIN: 1M8/9CM8A5CP036671

2 Type: **Bus** , Bus, Coach - 39+ Passenger
 Description: **This category covers coach, shuttle, and crew bus.**
 VIN: **015**
 Year: **1981**
 Make: **Mcl - #15**
 Model: **Mcl**
 License Number: **38618PR**
 License State: **WA**
 Zip: **99217**
 Wet: **W**
RATES
 Rate name: **Mileage**
 Rate type: **Mile**
 Rate description: **Mileage Rate**
 Rate: **\$3.75**

 Rate name: **Daily Rate**
 Rate type: **Daily**
 Rate description: **Daily Guarantee**
 Rate: **\$975.00**

COMMENTS
 VIN: 1M89CM6A2BP035818

3 Type: **Bus** , Bus, Coach - 39+ Passenger
 Description: **This category covers coach, shuttle, and crew bus.**
 VIN: **014**
 Year: **2008**
 Make: **Mcl - #14**
 Model: **Tmc**
 License Number: **38617PR**
 License State: **WA**
 Zip: **99217**
 Wet: **W**
RATES
 Rate name: **Mileage**
 Rate type: **Mile**
 Rate description: **Mileage Rate**
 Rate: **\$3.75**

 Rate name: **Daily rate**
 Rate type: **Daily**
 Rate description: **Daily Guarantee**
 Rate: **\$975.00**

COMMENTS
 VIN: 1TUAAH780BR002521

4 Type: **Bus** , Bus, Coach - 39+ Passenger
 Description: **This category covers coach, shuttle, and crew bus.**
 VIN: **007**

Year: **1979**
Make: **Mcl - #07**
Model: **9**
License Number: **27043PR**
License State: **WA**
Zip: **99217**
Wet: **W**

RATES

Rate name: **Mileage**
Rate type: **Mile**
Rate description: **Mileage Rate**
Rate: **\$3.75**

Rate name: **Daily rate**
Rate type: **Daily**
Rate description: **Daily Guarantee**
Rate: **\$975.00**

COMMENTS

VIN: S13834

Regional Agreement:

Hired at a Daily Rate OR Mileage rate, whichever is greater. Terms and Conditions as stated in the R6 Crew Carrier (school type buses) and Coach Buses for Incident Support RFQ AG-04H1-S-07-9002 are incorporated into this agreement with the same force as if given in full text. The Contractor shall carry a copy of their agreement as well as a complete copy of the solicitation and make it available upon request. Only those operators listed on the attached IBPA are authorized to act as operators under this agreement. Claims against the IBPA may be settled by any Contracting Officer acting within their authority and within limits set by the Incident Agency. In the event a settlement cannot be reached, the Incident Agency Contracting Officer will make the written final decision. A pre-use inspection and post inspection shall be performed on the equipment. Performance Evaluations shall be completed on ICS224, Crew Performance Rating form by the Government Representative supervising the equipment at the incident. A copy of the evaluation will be given to the Contractor at the incident, a copy forwarded to the CO, and the original mailed to the Grants Pass Interagency Office Attn: Kermadine Barton, 2164 Spalding Ave, Grants Pass, OR 97526. CO can be reached at 541-471-6746 or e-mail: kbarton@fs.fed.us