

SOLICITATION/CONTRACT/ORDER FOR COMMERICAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER	PAGE OF PAGE
2. CONTRACT NO. AG-04H1-B-11-7025	3. AWARD/EFFECTIVE DATE 05/05/2011 - 05/05/2014	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-11-7004	6. SOLICITATION ISSUE DATE 01/23/2011 14:35 PST	
7. FOR SOLICITATION INFORMATION CALL: Kermadine Barton			b. TELEPHONE NUMBER (No collect calls) 541-471-6746	8. OFFER DUE DATE/ LOCAL TIME 03/30/2011 16:00 PDT	
9. ISSUED BY USDA Forest Service US Forest Service Kermadine Barton Grants Pass Interagency Office 2164 NE Spalding Ave. Grants Pass, Oregon, 97526			10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: _____ % FOR: <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) NAICS: 811111 <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) SIZE STANDARD: \$7.0 million <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A)		
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE	12. DISCOUNT TERMS	13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING	
15. DELIVER TO	16. ADMINISTERED BY Kermadine Barton Grants Pass Interagency Office 2164 NE Spalding Ave. Grants Pass, Oregon, 97526	14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP			
17a. CONTRACTOR/OFFEROR Leavenworth Auto Care, Inc. 12413 Chumstick Hwy Leavenworth, Washington, 98826-9203	18a. PAYMENT WILL BE MADE BY Refer to Exhibit B	17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>			
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>	18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM				
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	VIPR I-BPA for Mechanic with Service Truck(s) for Region 6 - Pacific Northwest Region				
<i>(Use Reverse and/or Attach Additional Sheets as Necessary)</i>					
25. ACCOUNTING AND APPROPRIATION DATA			26. TOTAL AWARD AMOUNT (For Govt. Use Only)		
<input checked="" type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-5 ARE ATTACHED. ADDENDA			<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED		
<input checked="" type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA			<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED		
<input checked="" type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>1</u> 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			<input checked="" type="checkbox"/> 29. AWARD OF CONTRACT: REF. _____ OFFER DATED 05/05/2011 . 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/ Tim Timpe			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) /s/ Kermadine Barton		
30b. NAME AND TITLE OF SIGNER (Type or print) Tim Timpe -	30c. DATE SIGNED 03/26/2011	31b. NAME OF CONTRACTING OFFICER (Type or print) Kermadine Barton	31c. DATE SIGNED 05/05/2011		

Schedule of Items

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: LAC-T1			
Mechanic With Service Truck Type 1	MECH1	WA-CWC	Daily Rate \$1350.00/Day

Mechanic's First Name: Tim
 Mechanic's Last Name: Timpe
 Location City: Leavenworth
 Location State: WA
 Operator Experience (years): 28
 ASE Certification: Both Truck and Auto Master
 EVT Certificate Level: Master
 Fire Apparatus Experience (years): 5+
 Vocational School or Manufacturer Diesel/Heavy Equipment Mechanic Certificate: Yes
 Truck Equipped w/ Hydraulic Crane: Y

VIN Number: LAC-T1			
Mechanic With Service Truck Type 2	MECH1	WA-CWC	Daily Rate \$1200.00/Day

Mechanic's First Name: Tim
 Mechanic's Last Name: Timpe
 Location City: Leavenworth
 Location State: WA
 Operator Experience (years): 28
 ASE Certification: Both Truck and Auto Master
 EVT Certificate Level: Master
 Fire Apparatus Experience (years): 5+
 Vocational School or Manufacturer Diesel/Heavy Equipment Mechanic Certificate: Yes
 Truck Equipped w/ Hydraulic Crane: Y

Vendor Information

Company Name: Leavenworth Auto Care, Inc.

DBA:

DUNS: 837007277

Company Address:

12413 Chumstick Hwy

Leavenworth, Washington, 98826-9203

Mailing Address:

P.O. Box 251

Leavenworth, Washington, 98826-0251

Contact:

Name: Tim Timpe

Email: tnttimpe@tumwater.net

Daytime Phone: 509-548-1444

Evening/After Hours Phone: 509-548-3224

Cell/Alternate Phone: 509-669-7442

Fax: 509-548-3244

Discount Terms:

none

Business Status

HUBZone: N

Service-Disabled Veteran-Owned Small Business: N

8(a): N

Women-Owned Small Business: N

Economically Disadvantaged Women-Owned Small Business: N

LSA Flag: N

Supporting Documentation

Has Insurance (other than Workers' Compensation): No

Has DOT inspection(s): No

Has Workers' Compensation Insurance: Yes

Workers' Comp. Insurance Expiration Date: 12/31/2100

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y