

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-10-7257	3. AWARD/EFFECTIVE DATE 04/23/2010 - 04/23/2013	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-10-7002	6. SOLICITATION ISSUE DATE 02/10/2010 14:37 PST	
7. FOR SOLICITATION INFORMATION CALL: Kermadine Barton			b. TELEPHONE NUMBER (No collect calls) 541-471-6746	8. OFFER DUE DATE/ LOCAL TIME 03/03/2010 18:30 PST	
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: 115310 <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) SIZE STANDARD: \$ 17.5 million <input checked="" 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 Smokey Mountain 2624 Brookside Dr Medford, Oregon, 97504	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 R6 -2010 Water Handling Agreement				
<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 04/23/2010 . 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/ christopher kelton			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) /s/ Kermadine Barton		
30b. NAME AND TITLE OF SIGNER (Type or print) christopher kelton -	30c. DATE SIGNED 10/08/2010	31b. NAME OF CONTRACTING OFFICER (Type or print) Kermadine Barton	31c. DATE SIGNED 04/23/2010		

Schedule of Items

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: 1FDAW57F91EC21025			
Engine Type 5	03	OR-MIC	

VIN Number: 1FDXF47F73EA53148			
Engine Type 6	02	OR-MIC	

			Daily Rate \$2000.00/Day
			Daily Rate \$2000.00/Day

Vendor Information

Company Name: Smokey Mountain

DBA:

DUNS: 182479290

Company Address:

2624 Brookside Dr

Medford, Oregon, 97504

Mailing Address: same as above

Contact:

Name: Christopher Kelton

Email: smokeymountain08@yahoo.com

Daytime Phone: 541-840-8040

Evening/After Hours Phone: 541-840-8040

Cell/Alternate Phone: 541-840-8040

Fax: 541-776-4839

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: Y

Supporting Documentation

Has Insurance (other than Workers' Compensation): Yes

Has DOT inspection(s): Yes

Has Workers' Compensation Insurance: Yes

Workers' Comp. Insurance Expiration Date: 07/01/2012

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y

Engine Type 5

Resource Information

Unique ID: 1FDAW57F91EC21025
Equipment ID: 03
Make: Ford F-550
Model: Ford

Resource Location

City: Medford
State: Oregon
Zip Code: 97504
Zip Plus:

Resource Attributes

CAFS: No
All-Wheel Drive: Yes
Double Shift: No
Capacity for Engine T5: 400-500
Foam Proportioner System-2010A: Manually Regulated Proportioner
Pump Performance-2010: Excellent (150 psi or more)
Year for 2010 RCs: 2001

Engine Type 6

Resource Information

Unique ID: 1FDXF47F73EA53148
Equipment ID: 02
Make: Ford F 450
Model: Ford

Resource Location

City: Medfore
State: Oregon
Zip Code: 97504
Zip Plus:

Resource Attributes

All-Wheel Drive: Yes
CAFS: No
Double Shift: No
Foam Proportioner System-2010A: Manually Regulated Proportioner
Capacity for Engine T6: 226-300
Pump Performance-2010: Excellent (150 psi or more)
Year for 2010 RCs: 2003