

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERICAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</b>				1. REQUISITION NUMBER	PAGE OF PAGE	
2. CONTRACT NO. <b>AG-04H1-B-11-7155</b>	3. AWARD/EFFECTIVE DATE <b>05/23/2011 - 05/23/2014</b>	4. ORDER NUMBER	5. SOLICITATION NUMBER <b>AG-04H1-S-11-7001</b>	6. SOLICITATION ISSUE DATE <b>12/21/2010 10:30 PST</b>		
7. FOR SOLICITATION INFORMATION CALL: <b>Leif Shjeflo</b>			b. TELEPHONE NUMBER (No collect calls) <b>541-504-7380</b>		8. OFFER DUE DATE/ LOCAL TIME <b>02/25/2011 17:00 PST</b>	
9. ISSUED BY <b>USDA Forest Service</b>  <b>Leif Shjeflo</b> <b>Redmond Air Center</b> <b>1740 NE Ochoco Way</b> <b>Redmond, Oregon, 97756</b>			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: <b>115310</b> <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) SIZE STANDARD: <b>\$ 17.5 million</b> <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 <b>Leif Shjeflo</b> <b>Redmond Air Center</b> <b>1740 NE Ochoco Way</b> <b>Redmond, Oregon, 97756</b>			
17a. CONTRACTOR/OFFEROR  <b>A.G. Ontko Contracting LLC</b>  <b>1248 NW McDaniels Road</b> <b>Powell Butte, Oregon, 97753</b>  TELEPHONE NO. <b>541-419-8518</b>			18a. PAYMENT WILL BE MADE BY  <b>Refer to Exhibit B</b>			
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
	<b>VIPR I-BPA for Heavy Equipment for Region 6 - Pacific Northwest Region</b>					
<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 <b>05/23/2011</b> . 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 <b>/s/ Andrew Ontko</b>			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) <b>/s/ Leif Shjeflo</b>			
30b. NAME AND TITLE OF SIGNER (Type or print) <b>Andrew Ontko -</b>		30c. DATE SIGNED <b>05/21/2011</b>	31b. NAME OF CONTRACTING OFFICER (Type or print) <b>Leif Shjeflo</b>		31c. DATE SIGNED <b>05/23/2011</b>	

Schedule of Items

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: 92V1018			
Dozer Type 1	D7G	OR-COC	
		Daily Rate	\$1850.00/Day
		Mileage Rate	\$5.00/Mile
		Transport Rate	\$850.00/Day
		Double Shift Rate	\$3052.50/Day
License #: N/A			
License State: NA			
Make: Caterpillar			
Model: D7G			
Model Year: 1969			
Insurance Policy Expiration Date: 03/05/2012			
Location City: Powell Butte			
Location State: OR			
Flywheel Horsepower: 200			
Blade Type: Straight Blade/Manual Angle			
Winch: No			
Grapple: No			
Ripper: Yes			
Low Ground Pressure: No			
Double Shift: Yes			

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VIN Number: 9DL01036			
Dozer Type 3	D5C	OR-COC	
		Daily Rate	\$1450.00/Day
		Mileage Rate	\$4.50/Mile
		Transport Rate	\$850.00/Day
		Double Shift Rate	\$2392.50/Day
License #: N/A			
License State: NA			
Make: Caterpillar			
Model: D5C			
Model Year: 1995			
Insurance Policy Expiration Date: 03/05/2012			
Location City: Powell Butte			
Location State: OR			
Flywheel Horsepower: 75			
Blade Type: 6-Way Hydraulic			
Winch: No			
Grapple: Yes			
Ripper: No			
Low Ground Pressure: Yes			
Double Shift: Yes			

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: 210032167			

Excavator Type 2	210LX	OR-COC	Daily Rate	\$1850.00/Day
			Mileage Rate	\$5.00/Mile
			Transport Rate	\$850.00/Day
			Double Shift Rate	\$3052.50/Day

License #: N/A  
 License State: NA  
 Make: Linkbelt  
 Model: 210LX  
 Model Year: 2007  
 Insurance Policy Expiration Date: 03/05/2012  
 Location City: Powell Butte  
 Location State: OR  
 Flywheel Horsepower:130  
 Clamshell Bucket:Yes  
 Up Down Blade:No  
 Steep Ground Excavator:Yes  
 Double Shift: Yes

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VIN Number: E5178030				
Excavator Type 3	2700Q	OR-COC	Daily Rate	\$1200.00/Day
			Mileage Rate	\$4.50/Mile
			Transport Rate	\$850.00/Day
			Double Shift Rate	\$1980.00/Day

License #: N/A  
 License State: NA  
 Make: Linkbelt  
 Model: 2700Q  
 Model Year: 1997  
 Insurance Policy Expiration Date: 03/05/2012  
 Location City: Powell Butte  
 Location State: OR  
 Flywheel Horsepower:100  
 Clamshell Bucket:Yes  
 Up Down Blade:No  
 Steep Ground Excavator:Yes  
 Double Shift: Yes

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Vendor Information

Company Name: A.G. Ontko Contracting LLC

DBA:

DUNS: 869197376

Company Address:

1248 NW McDaniels Road

Powell Butte, Oregon, 97753

Mailing Address: same as above

Contact:

Name: Andrew Ontko

Email: gregontko@aol.com

Daytime Phone: 541-419-8518

Evening/After Hours Phone: 541-447-5565

Cell/Alternate Phone: 541-419-8518

Fax: 541-447-1956

Discount Terms:

none

Business Status

HUBZone: Y

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: 03/05/2012

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y