

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-10-7007	3. AWARD/EFFECTIVE DATE 04/12/2010 - 04/12/2013	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-10-7001	6. SOLICITATION ISSUE DATE 01/21/2010 22:47 PST	
7. FOR SOLICITATION INFORMATION CALL: Leif Shjeflo			b. TELEPHONE NUMBER (No collect calls) 541-504-7380	8. OFFER DUE DATE/ LOCAL TIME 03/12/2010 19:00 PST	
9. ISSUED BY USDA Forest Service Leif Shjeflo Redmond Air Center, 1740 Ochoco Way 1835 Black Lake Blvd. Redmond, Oregon, 97756			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 M <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 Leif Shjeflo Redmond Air Center 1740 NE Ochoco Way Redmond, Oregon, 97756	14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP			
17a. CONTRACTOR/OFFEROR Miller Timber Services, Inc. 24745 Alsea Hwy. Philomath, Oregon, 97370 TELEPHONE NO. 541-929-2840	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"/>			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 Heavy Equipment w/Water <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 1 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 04/12/2010 . 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/ Susan Neuman			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) /s/ Leif Shjeflo		
30b. NAME AND TITLE OF SIGNER (Type or print) Susan Neuman -	30c. DATE SIGNED 10/08/2010	31b. NAME OF CONTRACTING OFFICER (Type or print) Leif Shjeflo	31c. DATE SIGNED 04/12/2010		

Schedule of Items

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: 0120046			
Skidgine Type 1	PONSSE	OR-CVC	
			Daily Rate \$2695.2/Day
			Mobil/Demobil. \$3.00/Mile
			Trans. Min. Guarantee \$1680.00/Day
			Double Shift Rate \$4447.08/Day

Vendor Information

Company Name: Miller Timber Services, Inc.

DBA:

DUNS: 161236146

Company Address:

24745 Alsea Hwy.

Philomath, Oregon, 97370

Mailing Address:

PO Box 638

Philomath, Oregon, 97370

Contact:

Name: Susan Neuman

Email: susan@millertimber.com

Daytime Phone: 541-929-2840

Evening/After Hours Phone: 541-929-2840

Cell/Alternate Phone: None

Fax: 541-929-4489

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): Yes

Has DOT inspection(s): Yes

Has Workers' Compensation Insurance: Yes

Workers' Comp. Insurance Expiration Date: 04/01/2012

Has sufficient employees: Y

Is registered in CCR: Y

Has completed ORCA: Y

Skidgine Type 1

Resource Information

Unique ID: 0120046

Equipment ID: PONSSE

Make: Ponsse

Model: Buffalo King

Resource Location

City: Philomath

State: Oregon

Zip Code: 97370

Zip Plus:

Resource Attributes

Double Shift: Yes

Foam Proportioner System-2010B: Manually Regulated Proportioner

Monitor Softtrack or SkidginesT1T2-2010: Yes

Capacity for Skidgine T1-2010: 1500-2499

Year for 2010 RCs: 2006