

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-11-7056	3. AWARD/EFFECTIVE DATE 05/11/2011 - 05/11/2014	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-11-7003	6. SOLICITATION ISSUE DATE 12/17/2010 12:36 PST		
7. FOR SOLICITATION INFORMATION CALL: Leif Shjeflo			b. TELEPHONE NUMBER (No collect calls) 541-504-7380		8. OFFER DUE DATE/ LOCAL TIME 02/25/2011 17:00 PST	
9. ISSUED BY USDA Forest Service Leif Shjeflo Redmond Air Center 1740 NE Ochoco Way 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 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 Leif Shjeflo Redmond Air Center 1740 NE Ochoco Way Redmond, Oregon, 97756			
17a. CONTRACTOR/OFFEROR North Zone Fallers, Inc. 4705 Hartstrand Rd. Etna, California, 96027 TELEPHONE NO. 530-467-3367			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 Fallers 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 05/11/2011 . 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/ DAVID BRANSON			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) /s/ Leif Shjeflo			
30b. NAME AND TITLE OF SIGNER (Type or print) DAVID BRANSON -		30c. DATE SIGNED 02/24/2011	31b. NAME OF CONTRACTING OFFICER (Type or print) Leif Shjeflo		31c. DATE SIGNED 05/11/2011	

Schedule of Items

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: NZF-R6/FALLER MODULE-T1			
Faller Module Type 1	R6/MODULE	OR-MIC	Daily Rate \$1989.00/Day

Insurance Policy Expiration Date: 01/19/2013

Location City: JACKSONVILLE

Location State: OR

Configuration: Faller Module

Number of Units: 6

Roster: ROBERT FREEMAN, WILLIAM FREEMAN, GARRY ROSE, MARTY HERTLER, RICHARD HOLZHAUSER, ROGER PREFONTAINE, RICK MEE, CLAYTON GRIER, STACY DALBEC, LANCE BAKER, DAN FISCHER, RONALD HUBBELL

Item Description	Equipment ID	Dispatch Center	Rates
=====			
VIN Number: NZF-R6/SINGLE FALLER-T1			
Single Faller Type 1	R6-SINGLE	OR-MIC	Daily Rate \$994.50/Day

Insurance Policy Expiration Date: 01/19/2013

Location City: JACKSONVILLE

Location State: OR

Configuration: Single Faller

Number of Units: 12

Roster: ROBERT FREEMAN, WILLIAM FREEMAN, GARRY ROSE, MARTY HERTLER, RICHARD HOLZHAUSER, ROGER PREFONTAINE, RICK MEE, CLAYTON GRIER, STACY DALBEC, LANCE BAKER, DAN FISCHER, RONALD HUBBELL

Vendor Information

Company Name: North Zone Fallers, Inc.

DBA:

DUNS: 145051491

Company Address:

4705 Hartstrand Rd.

Etna, California, 96027

Mailing Address: same as above

Contact:

Name: DAVID BRANSON

Email: nzfallers@sisqtel.net

Daytime Phone: 530-467-3367

Evening/After Hours Phone: 530-467-3367

Cell/Alternate Phone: 530-598-9818

Fax: 530-467-3457

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): N/A

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