

MIAMI-DADE COUNTY
BLANKET PURCHASE ORDER

BPO ID: ABCW1700032 PRINT DATE: 11/04/2016 PAGE: 01

** REPRINT OF ORIGINAL BPO **

VENDOR ID: 650866859 PRIME VENDOR SET ASIDE :
SOUTH FLORIDA BOILER & GAS SERVICES INC SUBVENDOR GOAL : 00%
P.O. BOX 430965 PRIME VENDOR COMMITMENT: 00%
MIAMI FL 33243

SHIP TO:
AS SPECIFIED ON INDIVIDUAL ORDERS PLEASE REFER ALL QUESTIONS
CONCERNING THIS ORDER TO:
WILSON, BONNIE
(305) 375-5765

ITB ID	EXPR DATE	DISCOUNT TERMS	CONTRACT AMOUNT
AVCW1600241	10/31/2021	NET30	92,250.00

BID NUMBER
IB-00431

ITEM COMMODITY ID	U/M	UNIT COST
001 988-82	EA	92,250.0000

SWIMMING POOL MAINTENANCE (INCLUDING WATER TREA
END OF ITEM LIST

AUTHORIZED DEPTS/USERS

AUTHORIZED DEPT:	CALLERS NAME	PR*****	DOLLAR LIMIT	ALLOCATION:	PHONE NUMBER
			\$92,250.00	()	-

TERMS:

COSTS OF MANDATORY RANDOM AUDIT BY THE INSPECTOR GENERAL ARE
INCORPORATED INTO THIS CONTRACT AS 1/4 OF 1% OF THE CONTRACT
PRICE.

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THIS CONTRACT IS SUBJECT TO A USER ACCESS FEE UNDER THE COUNTY USER ACCESS PROGRAM (UAP) IN THE AMOUNT OF TWO PERCENT (2%). THE VENDOR PROVIDING GOODS AND SERVICES UNDER THIS CONTRACT SHALL INVOICE THE CONTRACT PRICE AND SHALL ACCEPT AS PAYMENT THEREOF THE CONTRACT PRICE LESS THE 2% UAP AS FULL AND COMPLETE PAYMENT FOR THE GOODS AND/OR SERVICES SPECIFIED ON THE INVOICE. THE COUNTY SHALL RETAIN THE 2% UAP FOR USE BY THE COUNTY TO HELP DEFRAY THE COST OF THE PROCUREMENT PROGRAM. VENDOR PARTICIPATION IN THIS INVOICE REDUCTION PORTION OF THE UAP IS MANDATORY.

THIS IS A BLANKET PURCHASE ORDER COVERING PERIOD FROM 11/01/2016 TO 10/31/2021. DELIVERIES AGAINST THIS PURCHASE ORDER SHALL BE MADE IN QUANTITIES AND TIMES AS REQUESTED BY THE DEPARTMENT DURING SAID PERIOD. INVOICING SHALL BE ON A PER ORDER (DELIVERY) BASIS OR ON A MONTHLY INVOICE BASIS. ALL ITEMS IN ACCORDANCE WITH BID PROVISIONS AND SPECIFICATIONS AND THE VENDOR'S QUOTE OR BID. ESTIMATED QUANTITIES AND/OR DOLLARS ARE FOR RECORD PURPOSES ONLY. NO GUARANTEE IS EXPRESSED OR IMPLIED AS TO QUANTITIES AND/OR DOLLARS THAT WILL ACTUALLY BE PURCHASED. THE VENDOR ACCEPTS ALL RISKS ASSOCIATED WITH USING THIS INFORMATION.

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AUTHORIZED SIGNATURE: _____



DATE: 11/04/16

***** LAST PAGE *****