## BLANKET PURCHASE ORDER STATE OF MARYLAND

\*\*\*\*\*\*\*\*\*\*\*\* STATE OF MARYLAND \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**BPO NO:** 001B5400072

**PRINT DATE:** 10/31/15

**PAGE:** 01

SHIP TO:					
AS SPECIFIED ON INDIVIDUAL ORDERS					
VENDOR ID: UNITED ELEVATOR CC 2828 10TH ST NE STE 6 WASHINGTON, DC (202)559-8565	MPANY L L C 20017	REFER QUESTIONS TO: TONIA V. WELLS (410)767-4720 TONIAV.WELLS@MARYLAND.	GOV		
ITB:	<b>EXPR DATE:</b> 08/01/17 <b>POST DATE:</b> 07/24/14		NET 30 DAY 50,148.00		

## TERMS:

ARTICLES HEREIN ARE EXEMPT FROM MARYLAND SALES AND USE TAXES BY EXEMPTION CERTIFICATE NUMBER 3000256-3 AND FROM FEDERAL EXCISE TAXES BY EXEMPTION NUMBER 52-73-0358K. IT IS THE VENDOR'S RESPONSIBILITY TO ADVISE COMMON CARRIERS THAT AGENCIES OF THE STATE OF MARYLAND ARE EXEMPT FROM TRANSPORTATION TAX.

H00 15 33631 0812 \$15,323.00 H00 16 33631 0812 \$16,716.00 H00 17 33631 0812 \$16,716.00 H00 18 33631 0812 \$ 1,393.00

PLEASE RETAIN SECTIONS A, B, C AND D FOR FUTURE REFERENCE

LINE #	STATE ITEM ID	U/M	UNIT COST
LINL $\pi$		0/101	

0001 91013-ELEVXX LT 50,148.0000

ELEVATOR MAINTENANCE

TO PROVIDE ELEVATOR MAINTENACE SERVICE FOR ROCKVILLE DC/MSC AT 191 E.JEFFERSON STREET, ROCKVILLE, MD 20850 FOR 3 YEARS BEGINNING AUGUST 1,2014 THROUGH JULY 31,2017

\$1393.00 X 36 MONTHS (3 YEARS) = \$50,148.00

\$92/HR FOR EMERGENCY/MAJOR REPAIR FOR MECHANIC

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**PAGE:** 02

## LINE # STATE ITEM ID U/M UNIT COST

**BPO NO:** 001B5400072

\$125/HR FOR OVERTIME BILLING FOR MECHANIC \$60/HR FOR EMERGENCY/MAJOR REPAIR FOR MECHANIC'S HELPER \$102/HR FOR OVERTIME BILLING FOR MECHANIC'S HELPER

\_\_\_\_\_ END OF ITEM LIST \_\_\_\_\_

THE BLANKET PURCHASE ORDER (BPO) ISSUED AS A RESULT OF THE INVITATION TO BID (ITB) AND ANY SUBSEQUENT AMENDMENTS, MODIFICATIONS OR OPTIONS ISSUED RELEVANT TO THE ITB OR BPO, SHALL COMPLY WITH ALL OF THE TERMS, CONDITIONS AND SPECIFICA-TIONS ISSUED WITH THE ITB AND ARE INCORPORATED IN AND MADE PART OF THE BPO.

STATE YOUR FEDERAL TAX IDENTIFICATION # \_\_\_\_146-2266715\_\_\_\_\_

IF THE STATE OF MARYLAND OR OTHER REGULATOR BODY REQUIRES A LICENSE OR CERTICATE TO PERFORM THE SERVICES REQUIRED, PLEASE PROVIDE THE LICENSE NUMBER AND DATE OF ISSUANCE.

\_\_\_\_1409 AND 1274\_\_\_\_\_ 4/30/15 AND 11/19/14 LICENSE NUMBER DATE OF EXPIRATION

IF YOU ARE A DEPARTMENT OF TRANSPORTATION CERTIFIED MINORITY BUSINESS, PLEASE PROVIDE YOUR CERTIFICATION NUMBER.

MDOT'S MBE CERTIFICATION NUMBER

DATE: