

# BLANKET PURCHASE ORDER

## STATE OF MARYLAND

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

**BPO NO:** 001B9400378

**PRINT DATE:** 04/10/19

**PAGE:** 01

### SHIP TO:

AS SPECIFIED ON INDIVIDUAL ORDERS

### VENDOR ID:

FALCON SOLUTIONS LLC  
704 SEVERNSIDE AVE

SEVERNA PARK, MD 21146  
(410 ) 627-3037

### REFER QUESTIONS TO:

CHARLES BAILEY  
(410 ) 767-6056  
CHARLES.BAILEY1@MARYLAND.GOV

### ITB:

**EXPR DATE:** 04/30/22  
**POST DATE:** 04/10/19

**DISCOUNT TERMS:** . NET 30 DAY  
**CONTRACT AMOUNT:** 4,937,019.84

### 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.

FUND SOURCE:	AGY	FY	PCA	AOBJ	AMT
	H00	19	33439	0899	\$ 269,936.84
	H00	20	33439	0899	\$1,623,940.06
	H00	21	33439	0899	\$1,649,923.24
	H00	22	33439	0899	\$1,393,219.70

RETAIN DETAILED SPECIFICATIONS AND CONTRACT (ATTACHMENT A) FOR FUTURE REFERENCE.

VENDOR CONTACT: EDWIN HIRSCH, (410) 627-3037,  
EHIRSCH@FALCONSOLUTIONSLLC.COM

AGENCY CONTACT: RICK TYSON, (410) 767-0004, RICK.TYSON@MARYLAND.GOV

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<u>LINE #</u>	<u>STATE ITEM ID</u>	<u>U/M</u>	<u>UNIT COST</u>	
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0001	96108	M	4,937,019.8400	
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BUILDING MANAGEMENT SERVICES

COMPREHENSIVE BUILDING MANAGEMENT AT THE NANCY S. GRASMICK STATE  
EDUCATION BUILDING FOR A TERM OF THREE (3) YEARS WITH TWO (2) ONE-  
YEAR RENEWAL OPTIONS.

END OF ITEM LIST

THE STATE RESERVES THE RIGHT TO ADJUST THE SCOPE OF WORK PROVIDED IN  
THE SPECIFICATIONS IN ORDER TO KEEP EXPENDITURES WITHIN AUTHORIZED  
APPROPRIATIONS.

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.

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

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

\*\*\*\*\* LAST PAGE \*\*\*\*\*

AUTHORIZED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

BUYER AUTHORIZED DESIGNEE