


SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS <i>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, AND 30</i>				1. REQUISITION NUMBER SEE SCHEDULE		PAGE 1 OF 44				
2. CONTRACT NO. HDEC04-15-C-0006		3. AWARD/EFFECTIVE DATE 17-Mar-2015		4. ORDER NUMBER		5. SOLICITATION NUMBER HDEC04-15-R-0006		6. SOLICITATION ISSUE DATE 06-Jan-2015		
7. FOR SOLICITATION INFORMATION CALL:		a. NAME KATHY P. PULLEN				b. TELEPHONE NUMBER (No Collect Calls) 804-734-8000 X.52860		8. OFFER DUE DATE/LOCAL TIME 04:00 PM 06 Feb 2015		
9. ISSUED BY DEFENSE COMMISSARY AGENCY SUPPLY & EQUIPMENT DIVISION BUILDING P 11200 1300 E AVENUE FORT LEE VA 23801-1800 TEL: FAX: (804) 734-8269/8886		CODE HDEC04		10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: <u>100</u> % FOR: <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB) <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) NAICS: 811310 SIZE STANDARD: \$7.5 Million						
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS		<input type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)		13b. RATING				
						14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP				
15. DELIVER TO SEE SCHEDULE		CODE		16. ADMINISTERED BY SEE ITEM 9						
17a. CONTRACTOR/OFFEROR C2G, LTD CO. TOM COPELAND 110 MALLOCK CT GOOSE CREEK SC 29445-5446 TELEPHONE NO. 843-879-0941 EXT 105		CODE 55DU0		FACILITY CODE		18a. PAYMENT WILL BE MADE BY DFAS-WIDE AREA WORK FLOW DFAS - CV/DAAA/CO P.O. BOX 369016 COLUMBUS OH 43236-9016				
						CODE HQ0131				
<input type="checkbox"/> 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
		SEE SCHEDULE								
25. ACCOUNTING AND APPROPRIATION DATA See Schedule							26. TOTAL AWARD AMOUNT (For Govt. Use Only) \$13,900.00			
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1. 52.212-4. FAR 52.212-3. 52.212-5 ARE ATTACHED. ADDENDA <input 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 type="checkbox"/> 29. AWARD OF CONTRACT: REF. OFFER DATED . 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					31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 					
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) DESSIE MILLS / CONTRACTING OFFICER TEL: (804) 734-8000 EXT 48511 EMAIL: dessie.mills@deca.mil			31c. DATE SIGNED 17-Mar-2015		

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
(CONTINUED)**

19. ITEM NO.	20. SCHEDULE OF SUPPLIES/ SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
<p>SEE SCHEDULE</p>					

32a. QUANTITY IN COLUMN 21 HAS BEEN
 RECEIVED INSPECTED ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED: _____

32b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32c. DATE	32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
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32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE
	32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	34. VOUCHER NUMBER	35. AMOUNT VERIFIED CORRECT FOR	36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL	37. CHECK NUMBER
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38. S/R ACCOUNT NUMBER	39. S/R VOUCHER NUMBER	40. PAID BY
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41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT	42a. RECEIVED BY <i>(Print)</i>		
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER	41c. DATE	42b. RECEIVED AT <i>(Location)</i>	
		42c. DATE REC'D <i>(YY/MM/DD)</i>	42d. TOTAL CONTAINERS

Section SF 1449 - CONTINUATION SHEET

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	Cherry Point Commissary - MHE FFP Preventive Maintenance (PM) and Repair on Material Handling Equipment Base: March 1, 2015 or date of award, through February 29, 2016				\$0.00
	PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.				
	The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached.				
	FOB: Destination PURCHASE REQUEST NUMBER: HQCCAZ42802700000				
				NET AMT	\$0.00

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AA		45	Labor Hours	\$70.00	\$3,150.00
	Time-Unscheduled Maint/Repairs Cherry Po				
	FFP				
	T&M				
	Hourly Rate				
	FOB: Destination				
					<hr/>
				NET AMT	\$3,150.00
	ACRN AA				\$3,150.00
	CIN: HQCCAZ42802700001AA				

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AB		3,000	Each	\$1.00	\$3,000.00
	Materials – Cherry Point				
	FFP				
	T&M				
	This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services.				
	FOB: Destination				
					<hr/>
				NET AMT	\$3,000.00
	ACRN AA				\$3,000.00
	CIN: HQCCAZ42802700001AB				

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AC	1R06 Electric Forklift -Chery Point FFP Semi-Annual Preventive Maintenance FOB: Destination	4	Each	\$100.00	\$400.00
					<hr/>
					NET AMT \$400.00
					ACRN AA \$400.00
					CIN: HQCCAZ42802700001AC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AD	1R05-A Electric Pallet Jack-Cherry Point FFP Semi-Annual Preventive Maintenance FOB: Destination	4	Each	\$50.00	\$200.00
					<hr/>
					NET AMT \$200.00
					ACRN AA \$200.00
					CIN: HQCCAZ42802700001AD

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AE	1R04 Charger Battery 36 Volt-Cherry Poin FFP Semi-Annual Preventive Maintenance FOB: Destination	4	Each	\$50.00	\$200.00
					<hr/>
					NET AMT \$200.00
					ACRN AA \$200.00
					CIN: HQCCAZ42802700001AE

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001AF	1R01 Charger Battery 24Volt-Cherry Point FFP Semi-Annual Preventive Maintenance FOB: Destination	4	Each	\$50.00	\$200.00
					<hr/>
					NET AMT \$200.00
					ACRN AA \$200.00
					CIN: HQCCAZ42802700001AF

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002					\$0.00

New River Commissary - MHE
 FFP
 Preventive Maintenance (PM) and Repair on Material Handling Equipment
 Base: March 1, 2015 or date of award, through February 29, 2016

PMs shall include: labor, parts, expendables, fluids and trip charges to perform the requirements listed in the PM checklist. See Performance Work Statement (PWS) attached.

The contractor is responsible for capturing costs to complete the administrative process of manpower reporting. See PWS attached.

FOB: Destination
 PURCHASE REQUEST NUMBER: HQCCA342802700000

NET AMT	\$0.00
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ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002AA		45	Labor Hours	\$70.00	\$3,150.00

Time-Unscheduled Maint/Repairs New River
 FFP
 T&M
 Hourly Rate

FOB: Destination

NET AMT	\$3,150.00
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ACRN AB	\$3,150.00
CIN: HQCCA342802700002AA	

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002AB	Materials – New River FFP T&M	3,000	Each	\$1.00	\$3,000.00
This is NOT a priced CLIN, it is a pre-determined amount where DeCA will pay actual costs for parts as evidenced by supplier invoice for direct materials and supplies used to accomplish preventive maintenance and repair services.					

FOB: Destination

NET AMT \$3,000.00

ACRN AB \$3,000.00
CIN: HQCCA342802700002AB

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002AC	1R06 Electric Forklift-New River FFP Semi-Annual Preventive Maintenance	4	Each	\$100.00	\$400.00
FOB: Destination					

NET AMT \$400.00

ACRN AB \$400.00
CIN: HQCCA342802700002AC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002AD	1R04 Charger Battery 36 Volt-New River FFP Semi-Annual Preventive Maintenance FOB: Destination	4	Each	\$50.00	\$200.00
					<hr/>
NET AMT					\$200.00
ACRN AB CIN: HQCCA342802700002AD					\$200.00