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Payment Ter	Payment Terms: NET30 Freight Terms: FOB Ship Via: VNDR PCC: Q Date: 07/03/19 PO Method: DG Dispatch: Dispatch Rev Dt: Destination Via Print										
PLEASE	PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS MAY BE LISTED AT THE END OF THE PURCHASE ORDER.										
Vendor:	ALLIED ELECTRIC SERVICES, INC. PO BOX 2691 USA GEORGETOWN TX 78627-2691 United States		Ship To:	1P00 - TxDMV Warehouse 4000 Jackson Avenue Austin TX 78731 United States							
Vendor ID:	1202362146 4		Bill To:	4000 Jackson Avenue Austin TX 78731 United States							
Purchaser: Phone: Fax: Email:	Ron Dale Hunter 512/465-5808 512/465-5641 Ron.Hunter@TxDMV.gov		Fax: Email:	DMV_FIN-INVOICES@TxDMV.gov							

PO Information:

Quantity(ies):

Quantities are estimated: TxDMV does not guarantee to purchase any minimum or maximum quantity. TxDMV reserves the right to increase or decrease the quantity(ies) of the purchase order at the same original terms and conditions. The vendor will be notified in writing by purchase order change notice of any requirements for any increased or decreased quantity(ies).

Cost of copper and aluminum will need to be reviewed at the time of purchase order contract.

Change orders will be allowed only if unforeseen conditions arise such as, but not limited to, increasing or decreasing quantities or if the department needs dictate changes. All changes shall be in the scope of original work. No verbal change orders shall be permitted. All change orders must be in writing with a Purchase Order Change Notice (POCN) issued by TxDMV Purchasing Section.

Payment:

Payment will be made in accordance with the Texas Prompt Payment Act, TGC, Subtitle F, Chapter 2251. Vendor shall submit one copy of a correct itemized invoice showing the purchase order number, payee ID., remit to address, and phone number on invoice. Vendors may submit an electronic invoice. All electronic invoices shall be sent to DMV_FIN-INVOICES@txdmv.gov (note: There is an underscore "_" between DMV and FIN). All invoices received at the email address will be filed for future reference and you will receive a receipt confirmation email. To avoid the confusion of duplicate invoices, please do not send other copies of this invoice via regular mail, fax or other means. On emails for electronic invoices, include the company name (as it appears on the invoice) and the purchase order number in the subject line to assist in identifying and processing your invoices in a timely manner. TxDMV will not incur any penalty for late payment if payment is made in 30 days or less from receipt of goods or services and a correct invoice, whichever is later.

Note: warrants will not be issued to a vendor without a current Texas Identification Number.

Reference Allied Electrical Services, Inc. proposal number S06182019 provided to William Comiskey by Allied Electrical Services Representative Michael Kupidlowski on 06/18/2019.

Texas Department of Motor Vehicles (TxDMV) Contact: William Comiskey Electrical Coordinator (512) 465-1284 Will.Comiskey@txdmv.gov

Allied Electrical Services, Inc Contact: Michael Kupidlowski 512-677-8009 michaelk@alliedelectric.us

Authorized Signature

Tunter, CTPM, CTCA, CTP

07/03/2019



Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date			
1-1	Replacement of exterior Lights and Fans for the Texas Department of Motor Vehicles located at 4000 Jackson Avenue, Camp Hubbard Bldg. 1.	914/38	1.0000	EA	\$15,340.00000	\$15,340.00	07/10/2019			
						Schedule Total	\$15,340.00			
				Req	<u>ID:</u>					
				0000	007888					
1. Replace 10 wall packs located on the exterior of the building with new LED wall packs.										
2. Replace	2. Replace 4 light fixtures located at the receiving area with new LED light fixtures.									
3. Replace	3. Replace 4 ceiling fans in the break area.									
4. Replace	4. Replace the 4 surface mounted lights in the break area with new LED lights. Lights are located next to the ceiling fans.									
5. Replace	5. Replace the 8 surface mounted lights at the main entrance to the building with new LED lights.									
6. Properly	6. Properly dispose of all existing light fixtures that were removed.									
7. Approva	7. Approval of all fixtures will be required prior to ordering.									
8. All work	8. All work to be completed by August 31st but fixtures must be approved by July 10th.									
9. All work	to be performed during normal b	ousiness hours.								
10. Test an	d verify operation upon completion	on.			Item T	Sotal for Line # 1	\$15,340.00			
					Т	otal PO Amount	\$15,340.00			

Total PO Amount

All Shipments, Shipping papers, invoices and correspondence must be identified with our Purchase Order Number. Over shipments will not be accepted unless authorized by Purchaser prior to Shipment.

Texas Department of Motor Vehicles Standard Terms and Conditions can be found at: http://www.txdmv.gov/contractors-vendors

Authorized Signature
NA
SA - mail and and
17 Sunter, CTPM, CTCM, CTP

	CMBL/HUB Vendor Detail
Vendor ID / Vendor Number	1202362146400 / 63411
Vendor Name	ALLIED ELECTRIC SERVICES, INC.
Vendor Address	PO BOX 2691 GEORGETOWN, TX 78627-2691 USA
county	WILLIAMSON
Contact	Contact Paige Paul
Phone/Fax	512-930-0767 / 512-868-1250
Email Address	paige@alliedelectric.us
Website	http://www.alliedelectric.us
Business Description	Electrical Contractor
Business Category	Special Trade Construction (03)
Small Business	×
Service Disabled Veteran	N
CMBL Status	Active Bidder
CMBL Expires	12-DEC-2019
HUB Status	Active Bidder (A-Approved; Active Texas certified HUB)
HUB Expires	22-FEB-2022 [`]
HUB Eligibility	HUB Eligibility WO (American Woman)
HUB Gender	
	Commodity items shown above are available for district(s) 9,14
	 It is a submitted with the submitted w

Phone: (512) 930-0767 Fax: (512) 868-1250 TECL# 21659	City of Austin D.B.E/ W.B.E # VS0000027122	Date: 06/18/2019 <u>Work To Be Performed At:</u> Exterior Lighting 4000 Jackson Avenue	Allied Electric Services, Inc. ("Allied") proposes to furnish all the materials and perform all the labor needed for the completion of the following work: 1. Replace 10 wall packs located on the exterior of the building with new LED wall packs. 2. Replace 4 light fixtures located at the receiving area with new LED light fixtures. 3. Renlace 4 ceiling fans in the hreak area.	Replace the 4 surface mounted lights in the break area with new LED lights. Lights are located next to the ceiling face	Replace the 8 surface mounted lights at the main entrance to the building with new LED lights. Properly dispose of all existing light fixtures that were removed. Approval of all fixtures will be required prior to ordering. All work to be completed by August 31 st but fixtures must be approved by July 10 th . All work to be performed during normal business hours. Test and verify operation upon completion.	price for the work do not include anything else. In particular, it does not include:	Any work to the existing circuitry. Permit Fees. Any applicable sales tax. Alterations of existing canopy lighting boxes. Any new or altering of exterior lighting controls. Cutting or patching. Overtime, expediting or acceleration fees. Low voltage wiring of any kind. Concrete work of any kind. Concrete work of any kind, including equipment pads, saw cutting and pour back. Painting or welding.
Allied P.O. Box Phone: (51	State of Texas H.U.B. # 1202362146400	Proposal Number: S06182019 <u>Submitted to:</u> William Comiskey: Texas DMV 4000 Jackson Avenue Austin, TX 78731 512-465-1284 Will.Comiskey@TxDMV.gov	Allied Electric Services, Inc. ("Allied") proposes to furnish al completion of the following work: 1. Replace 10 wall packs located on the ext 2. Replace 4 light fixtures located at the re 3. Renlace 4 ceiling fans in the break area.	4. Replace the 4 surface mount the colling fans	 Replace the 8 surface mounted lights at the main entranc Replace the 8 surface mounted light fixtures that were re Properly dispose of all existing light fixtures that were re Approval of all fixtures will be required prior to orderin All work to be completed by August 31st but fixtures mus All work to be performed during normal business hours. Test and verify operation upon completion. 	The work and the price for the work do not inclu	 Any work to the existing circuitry. Permit Fees. Any applicable sales tax. Any new or altering of exterior lighting boxes. Any new or altering of exterior lighting contron to the cutting or patching. Cutting or patching. Overtime, expediting or acceleration fees. Low voltage wiring of any kind. Concrete work of any kind, including equipm 10) Painting or welding.

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All material is to be as specified in and will be installed in accordance with the plans and specifications in a neat and workmanlike manner for the sum of:

Total... \$ 15,340.00

**Cost of copper/aluminum will need to be reviewed at time of contract

-Any change to the work to be done and/or any request for extra labor will be performed only after the parties have executed a written change order. The price for such work will be an extra charge over and above the original price. Submission of draws will be for work completed and materials delivered to the jobsite. Invoices for draws may be submitted at such times as deemed appropriate by Allied.

-This proposal may be withdrawn at any time upon notice from Allied. In any case, it will be automatically withdrawn after thirty (30) days from the date of this proposal.

ALLIED ELECTRIC SERVICES, INC.

By: Michael Kupidlowski 512-677-8009 michaelk@alliedelectric.us Regulated by The Texas Department of Licensing and Regulation, P. O. Box 12157, Austin, Texas 78711, 1-800-803-9202, 512-463-6599

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Each person who signs this document represents by his signing that he is a representative of the party for which he signs and duly authorized by it to do so.

By:



CERTIFICATE OF LIABILITY INSURANCE

RLANCASTER

DATE (MM/DD/YYYY)

ALLIELE-01

		111							7/1/2019
THIS CERTIFICATE IS ISSUED AS CERTIFICATE DOES NOT AFFIRM BELOW. THIS CERTIFICATE OF REPRESENTATIVE OR PRODUCER	ATIVEL	LY O	R NEGATIVELY AMEND E DOES NOT CONSTITU	, EXTE	ND OR ALT	ER THE CO	OVERAGE AFFORD	ED BY TI	HE POLICIES
IMPORTANT: If the certificate ho If SUBROGATION IS WAIVED, su this certificate does not confer righ	oject to	b the	terms and conditions of	the po	licy, certain	policies may			
PRODUCER				CONTA NAME:	CT				
Texas Associates Insurors P O Box 29				PHONE (A/C, No	o, Ext): (512) 3	860-2565	FAX (A/C,	No): (512)	327-8337
Smithville, TX 78957				E-MAIL	SS:				
							RDING COVERAGE		NAIC #
						Insurance			31325
INSURED							rn Insurance Com		10804
Allied Electric Services, PO Box 2629	nc.				-	Lloyds Ins	urance Company		43389
Georgetown, TX 78627				INSURE					
				INSURE					
COVERAGES C		C A TI	E NUMBER:	INSURE	KF:				
THIS IS TO CERTIFY THAT THE POL		-		HAVE B	FEN ISSUED				
INDICATED. NOTWITHSTANDING AN	/ REQU	IREM	ENT, TERM OR CONDITIO	N OF A	NY CONTRA	CT OR OTHER	R DOCUMENT WITH RE	ESPECT TO	O WHICH THIS
CERTIFICATE MAY BE ISSUED OR M EXCLUSIONS AND CONDITIONS OF SU								CT TO ALL	. THE TERMS,
NSR TYPE OF INSURANCE	ADD			DEEN	POLICY EFF	POLICY EXP (MM/DD/YYYY)		LIMITS	
A X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000
CLAIMS-MADE X OCCUR			CPA4760904-11		12/7/2018	12/7/2019	DAMAGE TO RENTED PREMISES (Ea occurrence	e) \$	100,000
						MED EXP (Any one persor	·	5,000	
							PERSONAL & ADV INJUR		1,000,000
<u>GEN'L AGGREGATE LIMIT APPLIES PER:</u>	_						GENERAL AGGREGATE	\$	2,000,000
POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP A	AGG \$	2,000,000	
OTHER:								\$	
					12/7/2019	COMBINED SINGLE LIMIT (Ea accident)	Г \$	1,000,000	
X ANY AUTO OWNED AUTOS ONLY SCHEDULED			CPA4760904-11	12/7/2018		12/7/2018	BODILY INJURY (Per pers	son) \$	
						BODILY INJURY (Per acci	dent) \$		
HIRED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
								\$	2,000,000
	_		CUA4760905-11		12/7/2018	12/7/2019	EACH OCCURRENCE	\$	2,000,000
EXCESS LIAB CLAIMS-M	DE		COA4700303-11		12/1/2010	12/1/2013	AGGREGATE	\$	2,000,000
DED RETENTION \$ C WORKERS COMPENSATION	—						Y PER 0	\$ TH-	
AND EMPLOYERS' LIABILITY	/ N		WC0099103-2018A	12/7/2018	12/7/2019	X PER OT STATUTE EF		1,000,000	
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		`	-				E.L. EACH ACCIDENT	\$ 0VEE \$	1,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLO		1,000,000
A Commercial Inland Ma			CPA4760904-11		12/7/2018	12/7/2019	Leased/Rented Eq		200,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VE	HICLES (ACORI	D 101, Additional Remarks Schedu	ule, may b	e attached if mor	e space is requir	red)		
CERTIFICATE HOLDER				CANC	ELLATION				
				600			ESCRIBED POLICIES E		
Texas Department of Mot	or Vobi			THE	EXPIRATIO	N DATE TH	IEREOF, NOTICE WI		
TEXAS Department of Mor	or veni	0162		ACC	ORDANCE WI	TH THE POLIC	CY PROVISIONS.		

Texas Department of Motor Vehicles 4000 Jackson Ave. Austin, TX 78731

AUTHORIZED REPRESENTATIVE

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MM

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