

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER BLM # HAA 083034	PAGE 1 OF 40	
2. CONTRACT NO. AG-04H1-S-08-702	3. AWARD/EFFECTIVE DATE 7/18/08	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-08-9003	6. SOLICITATION ISSUE DATE: 03/20/2008		
7. FOR SOLICITATION INFORMATION CALL: ▶	a. NAME Willie Begay: Contract Operations Specialist Kermadine Barton: Contracting Officer		b. TELEPHONE NUMBER (No collect calls) 503-808-2328 541-471-6746		8 OFFER DUE DATE: 04/21/2008 LOCAL TIME: 4:30 P.M.	
9. ISSUED BY USDA Forest Service R-6 Pacific Northwest Region Grants Pass Interagency Office 2164 NE Spalding Avenue Grants Pass, OR 97526		CODE	10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: 100% FOR: <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> EMERGING SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE DISABLED VETERAN- OWNED SMALL BUSINESS <input type="checkbox"/> 8(A) NAICS: 484110 SIZE STANDARD: \$23.5 mil			
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)	13a. RATING		
15. DELIVER TO CODE		16. ADMINISTERED BY CODE		14. METHOD OF SOLICITATION <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP		
17a. CONTRACTOR/ CASCADe Ice LLC PO Box 307 Bend, OR 97709 TELEPHONE NO. 541 312-2910		CODE	CODE	18a. PAYMENT WILL BE MADE BY CODE Refer to D.21.5		
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			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
	Refrigerated Trailer Unit(s) for use on Incident Assignments. (see attached)  Operating Supplies Furnished by: [ ] Contractor [X] Government Operator Furnished by: [ ] Contractor [X] Government				See Section B	
25. ACCOUNTING AND APPROPRIATION DATA				26. TOTAL AWARD AMOUNT (For Govt. Use Only)		
<input checked="" type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA				<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED		
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA				<input 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 Ted Pavlicek Member LLC			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) Kermadine Barton			
30b. NAME AND TITLE OF SIGNER (Type or print) Ted PAVLICEK		30c. DATE SIGNED 5-6-08	31b. NAME OF CONTRACTING OFFICER (Type or print) Kermadine Barton		31c. DATE SIGNED 7/18/08	

AUTHORIZED FOR LOCAL REPRODUCTION  
PREVIOUS EDITIONS IS NOT USABLE

STANDARD FORM 1449 (REV. 3/2005)  
PRESCRIBED BY GSA - FAR (48 CFR) 53.212

**AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT** 1. CONTRACT ID CODE PAGE OF PAGES  
 1 1

2. AMENDMENT/MODIFICATION NO. **Amendment No. 1** 3. EFFECTIVE DATE **04/16/2008** 4. REQUISITION/PURCHASE REQ. NO. 5. PROJECT NO. (If applicable)

6. ISSUED BY CODE **USDA FOREST SERVICE  
 FIRE PROCUREMENT SPECIALIST  
 2164 NE SPALDING AVENUE  
 GRANTS PASS, OR 97526** 7. ADMINISTERED BY (If other than Item 6) CODE

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State, and ZIP Code) (X) 9A. AMENDMENT OF SOLICITATION NO. **AG-04H1-S-08-9003**  
 9B. DATED (SEE ITEM 11) **03/20/2008**  
 10A. MODIFICATION OF CONTRACT/ORDER NO.   
 10B. DATED (SEE ITEM 13)

**11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS**

The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers  is extended,  is not extended.  
 Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:  
 (a) By completing items 8 and 15, and returning 1 copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted;  
 or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

**13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.**

A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.  
 B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).  
 C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:  
 D. OTHER (Specify type of modification and authority)

**E. IMPORTANT:** Contractor  is not,  is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

The Quoter is required to acknowledge this amendment by signing block 15b. and returning page 1 and the revised Schedule of Items to the Contracting Officer. You may fax to 541-471-6512 or mail hard copy to the address shown in block 9. of the SF-1449.

The Closing Date of this Solicitation has been changed to April 28, 2008, at 4:30 p.m.

This solicitation is amended as shown on the attached pages:

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) <b>Ted Pavlicek Member LLC</b>		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) <b>Kermadine Barton</b>	
15B. CONTRACTOR/OFFEROR <b>Ted Pavlicek</b> (Signature of person authorized to sign)	15C. DATE SIGNED <b>5-6-08</b>	16B. UNITED STATES OF AMERICA <b>Kermadine Barton</b> (Signature of Contracting Officer)	16C. DATE SIGNED <b>4/16/2008</b>

Schedule of Items

<b>Item 1 Type 1 Refrigerated Trailer Unit</b> (43+ feet overall length)	Daily Rate Weekly Rate Monthly Rate	<del>           \$ _____            \$ _____            \$ _____         </del>
<b>Item 2 Type 2 Refrigerated Trailer Unit</b> (29 to 43 feet overall length)	Daily Rate Weekly Rate Monthly Rate	<del>           \$ _____            \$ _____            \$ _____         </del>
<b>Item 3 Type 3 Refrigerated Trailer Unit</b> (24 to 28 feet overall length)	Daily Rate Weekly Rate Monthly Rate	\$ 125.00 \$ 800.00 \$ 2500.00
<b>Item 4 Mobilization/Demobilization</b> (Includes setup/takedown)	Mileage Rate	✓ \$ 2.50 Mile

Offers may be submitted on any or all Types.

Company Name	CASCADE ICE LLC		
DUNS Number	128202285		
Contact Name	Ted PAVLICEK		
E-Mail Address	Sales @ Cascade Ice LLC, Com		
Phone Numbers (up to 6)	(541) 312-2910	(541) 410-1055	(541) 309-1393
	(541) 480-1968	(541) 388-1038	
Fax Number	(541) 312-2903		
Mailing Address	Street: P.O. BOX 307		
	City/State	Bend OREGON	Zip: 97709

Pager

Number of Units Available	City/State (Identify the dispatch location (city/state) if different than the offeror's address)
____ Type 1    ____ Type 2    3 <del>0</del> Type 3	Bend, Oregon
____ Type 1    ____ Type 2    ____ Type 3	/
____ Type 1    ____ Type 2    ____ Type 3	

1. I am  am not  registered in the Contractor Central Registration (CCR) system.
2. I have  have not  completed my representations and certifications on-line (Ref. E.3)