

**FALLER AGREEMENT 2008**

Harwater Logging Inc  
55338 Homestead Way  
Bend, OR 97707-2527  
Ph #541-815-4177

Contract # AG-04H1-B-08-7021  
Awarded: 07/21/08  
DUNS: 148631471

Type 1 Professional Single Faller, Daily Rate: \$800.00  
Type 1 Professional Faller Module, Daily Rate: N/A

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NUMBER Blm # HAA083043	PAGE 1 OF 43
2. CONTRACT NO. AG-04H1-B-08-7021		3. AWARD/EFFECTIVE DATE 7/21/08	4. ORDER NUMBER	5. SOLICITATION NUMBER AG-04H1-S-08-9004	6. SOLICITATION ISSUE DATE: 03/20/2008
7. FOR SOLICITATION INFORMATION CALL: ▶		a. NAME Willie Begay: Contract Operation 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:
			NAICS: 115310	<input checked="" type="checkbox"/> SMALL BUSINESS	<input type="checkbox"/> EMERGING SMALL BUSINESS
			SIZE STANDARD: \$16.5 mil	<input type="checkbox"/> HUBZONE SMALL BUSINESS	
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED		12. DISCOUNT TERMS		<input type="checkbox"/> 13a THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)	13a. RATING
<input type="checkbox"/> SEE SCHEDULE					14. METHOD OF SOLICITATION
				<input checked="" type="checkbox"/> RFQ	<input type="checkbox"/> IFB
				<input type="checkbox"/> RFP	
15. DELIVER TO			CODE	16. ADMINISTERED BY	
				CODE	
17a. CONTRACTOR/			CODE	CODE	18a. PAYMENT WILL BE MADE BY
Harwater Logging Inc. 55338 Homestead Way, Bend, OR TELEPHONE NO. 541-815-4177 97707					Refer to D.21.8
<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
	Single Fallers and Faller Modules for use on Incidents and Severity assignments (see attached)				See Section B 800.00
	Operating Supplies Furnished by: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government				800.00
	Operator Furnished by: <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Government				
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 1 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 Steve Harpole			31a UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) Kermadine Barton		
30b. NAME AND TITLE OF SIGNER (Type or print) Steve Harpole Pres.		30c. DATE SIGNED 5-21-08	31b. NAME OF CONTRACTING OFFICER (Type or print) Kermadine Barton		31c. DATE SIGNED 7/21/08

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

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)

*Harwater Logging Inc  
55338 Homestead Way  
Bend OR, 97707 541-815-4177*

(X)

9A. AMENDMENT OF SOLICITATION NO.

**AG-04H1-S-08-9004**

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)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

*Steve Harpole Pres.*

**Kermadine Barton**

15B. CONTRACTOR/OFFICER

15C. DATE SIGNED

16B. UNITED STATES OF AMERICA

16C. DATE SIGNED

*Steve Harpole*  
(Signature of person authorized to sign)

**5-21-08**

*Kermadine Barton*  
(Signature of Contracting Officer)

**4/16/2008**



Type 1 Professional Faller Module: 1 modules available  
(Identify each faller module with a unique resource number/name for identification purposes).

Equipment ID (Resource Number/Name)	City/State (Identify the dispatch location (city/state) for each if different than the offeror's address)

Type 2 Class C Faller Module: \_\_\_\_\_ modules available  
(Identify each faller module with a unique resource number/name for identification purposes).

Equipment ID (Resource Number/Name)	City/State (Identify the dispatch location (city/state) for each if different than the offeror's address)

- 1.  I certify that all fallers proposed under this solicitation meet the training and experience requirements stated in D.3.1
- 2.  I certify that all fallers proposed under this solicitation are covered by Workman's Compensation or a legal exemption.
- 3. I am  am not  registered in the Contractor Central Registration (CCR) system.
- 4. I have  have not  completed my representations and certifications on-line (Ref. E.3)