FALLER AGREEMENT 2008

PO Box 604
John Day, OR 97845-0604
Ph #541-760-7519

Contract # AG-04H1-B-08-7047 Awarded: 07/29/08 DUNS: 147361039

Type 1 Professional Single Faller, Daily Rate: \$1200.00 Type 1 Professional Faller Module, Daily Rate: \$2100.00

SOLICITATION	CONTRACT/C	RDER FO	OR COM	MERCIA	L ITEMS		1. REQUISTIO	NUMB	ER	PAGE	1 OF 43	
OFFEROR	TO COMPLET	TE BLOCI	KS 12, 17	, 23, 24,	& 30		HAHOS'	306	ላ			
2. CONTRACT NO.	-08-7047		SFFECTIVE	4. ORD	ER NUMBER	?	5. SOLICITATI		BER	i	CITATIO	
7. FOR SOLICITATION C	ON _	a. NAME Willie B	egay: Contrac adine Barton:					E NUMBE 3-808-232 1-471-674	8	04/21/2	R DUE D 008 TIME: 4	
9. ISSUED BY			CODE		10. Th	IIS A	CQUISITION IS	3				
					□ UN	IRES	TRICTED OR	0	SET ASIDE:		100 % F	OR:
USDA Forest Service R-6 Pacific Northwest F Grants Pass Interagent 2164 NE Spalding Aver	y Office								SMALL BUSIN		☐ EME SMALL	RGING BUSINESS
Grants Pass, OR 9752					NAICS SIZE S		5310 DARD: \$16,5	S	BUSINESS SERVICE DISA MALL BUSINES B(A)		TERAN-(OWNED
11. DELIVERY FOR FO UNLESS BLOCK IS MA		12. DISCO	JNT TERMS		1 -		S CONTRACT ORDER UNDE		3a. RATING			
SEE SCHEDULE					DP	AS (15 CFR 700)	1	4. METHOD OF	SOLICITA	TION	
C off oot in port					.			D	RFQ	□IFB	********	☐ RFP
15. DELIVER TO			CODE		16. AD	MIN	ISTERED BY			CODE		
17a. CONTRACTOR/	CODE	1	CODE		18a. P	AYM	ENT WILL BE M	MADE BY		CODE		···.
Levi Watterse P.O. Box 604 John Day OR TELEPHONE NO. (54)	•				Refer	to E	0.21.8				!	
17b. CHECK IF REM OFFER	ITTANCE IS DIFFER	ENT AND PU	T SUCH ADD	RESS IN			IT INVOICES T W IS CHECKED		SS SHOWN IN I	BLOCK 16	Ba UNLES	S BLOCK
19. ITEM NO.		EDULE OF SI				_	21. QUANTITY	22. UNIT	23. UNIT P		AN	24. IOUNT
	Single Fallers and Severity ass Operating Supplies Operator Furnished	ignments (see Fumished by:	attached)	tor []Go	overnment				See Section	B		
25. ACCOUNTING AND	APPROPRIATION D	ΔΤΑ						ae TOT	AL AMAZED ANA	N. IN. T. 45-		
		•••						20. 101	AL AWARD AMO	JUNI (FO	r Govr. Us	se Uniy)
☑ 27a. SOLICITATION INC	ORPORATES BY REFER	ENCE FAR 52.	212-1, 52.212-4	FAR 52.21	2-3 AND 52.212	2-5 AF	RE ATTACHED.	ADDENDA	⊠ Af		[] ARE NO	
27b. CONTRACT/PURCH	IASE ORDER INCORPO	RATES BY REF	ERENCE FAR	52.212-4. FA	R 52.212-5 IS	ATTA	CHED. ADDEND	A	□ AF	₹E	ATTACHEI ATTACHEI	эτ .
28. CONTRACTOR IS COPIES TO ISSUING DELIVER ALL ITEMS ADDITIONAL SHEET	OFFICE. CONTRAC SET FORTH OR OTI	TOR AGREE	S TO FURNIS	SH AND BOVE AND	ON ANY		29. AWARD OFFER DATED (BLOCK 5), INC ARE SET FORT	CLUDING		OFFER O	ON SOLIC	IŢĄTION
30a. SIGNATURE OF OF	Atterson	OR			31a UNITE	D S	TATES OF AME	ERICA (SI	GNATURE OF C	ONTRAC	TING OF	FICER)
30b. NAME AND TITLE O	OF SIGNER (Type or)	orint)	30c. DATE S	ICNED	ALLY	15	rathe	<u></u>	arten	, , , , , ,		
Lovi Whater		' 1					adine	_	ER (Type or print トート) 310	DATE S	1

AUTHORIZED FOR LOCAL REPRODUCTION PREVIOUS EDITIONS IS NOT USABLE

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

			1. CONTRACT ID	CODE	PAGE	OF PAGES
AMENDMENT OF SOLICITAT	ION/MODIFICATIO	N OF CONTRACT	1. CONTRACT IS	CODE	1	
2. AMENDMENT/MODIFICATION NO. Amendment No. 1	3. EFFECTIVE DATE 04/16/2008	4. REQUISITION/PURCHA	SE REQ. NO.	5. PROJECT N	O. (If applic	able)
6. ISSUED BY COI	DE	7. ADMINISTERED BY (If	other than Item 6)	CODE		
USDA FOREST SERVICE FIRE PROCUREMENT SPECIALI 2164 NE SPALDING AVENUE GRANTS PASS, OR 97526	ST					
8. NAME AND ADDRESS OF CONTRACTOR	(No., atreet, county, State, and	ZIP Code)	(X) 9A. AME	NDMENT OF SOLI	CITATION	NO.
Levi Watterson (ontracting		AG-0	4H1-S-08-900	4	
	J		1 1	D (SEE ITEM 11)		
PO Box 604	_			0/2008 DIFICATION OF C	ONTRACT/	ORDER NO.
John Day, Dr	97845		-	ED (SEE ITEM 13		
CODE	FACILITY CODE					
, , , , , , , , , , , , , , , , , , ,		S TO AMENDMENTS				
The above numbered solicitation is an	nended as set forth in Item	14. The hour and date s	pecified for receip		s extended s not exter	•
Offers must acknowledge receipt of this ar	nendment prior to the hou	r and date enecified in the	solicitation or as	ш ·		
methods:	nendment phor to the hou	and date specified in the		amender of em		
(a) By completing Items 8 and 15, and retu offer submitted;	uming 1 copies of the ame	ndment; (b) By acknowled	iging receipt of th	is amendment o	n each cop	y of the
or (c) By separate letter or telegram ACKNOWLEDGMENT TO BE RECEIVED SPECIFIED MAY RESULT IN REJECTION change may be made by telegram or letter prior to the opening hour and date specifie	D AT THE PLACE DESIGN OF YOUR OFFER. If bur, provided each telegramed.	SNATED FOR THE RECE ov virtue of this amendmen	IPT OF OFFER! It vou desire to ct	3 PRIOR TO TH nange an offer al	IE HOUR ready sub	mitted, such
12. ACCOUNTING AND APPROPRIATION DA	TA (If required)					
13. THIS ITE	EM APPLIES ONLY TO	MODIFICATIONS OF I/ORDER NO. AS DES	CONTRACTS/	ORDERS, 'M 14		
(X) A. THIS CHANGE ORDER IS IS	SUED PURSUANT TO:	(Specify authority) THE C	HANGES SET FO	ORTH IN ITEM 1	4 ARE MA	DEIN
THE CONTRACT ORDER N					<u> </u>	
B. THE ABOVE NUMBERED C	ONTRACT/ORDER IS MO	DDIFIED TO REFLECT T	HE ADMINISTRA	TIVE CHANGES	(auch es	changes in
C. THIS SUPPLEMENTAL AGE	REEMENT IS ENTERED IN	NTO PURSUANT TO AUT	HORITY OF:	D1 1744 101100(1	···	
D. OTHER (Specify type of mod	lification and authority)					
<u> </u>						
		o sign this document a				
14. DESCRIPTION OF AMENDMENT/MODIFIC	ATION (Organized by UCF 86	ection headings, including soli	citation/contract eut	ject matter where t	@#\$! Q !#.	
The Quoter is required to acknowled Schedule of Items to the Contract block 9. of the SF-1449.	ledge this amendment ing Officer. You may	t by signing block 15i fax to 541-471-6512 o	o, and returnin r mail hard cop	g page 1 and to by to the addre	the revis ess shov	ed vn in
The Closing Date of this Solicitation	on has been changed	to April 28, 2008, at 4	:30 p.m.			
_						
This solicitation is amended as sh	lown on the strached	pages:				
Except as provided herein, all terms and condition 15A. NAME AND TITLE OF SIGNER (Type or pr	ns of the document references	d in Item 9A or 10A, as hereto	fore changed, rema	ins unchanged and TING OFFICER (7)	l in full force ype or print)	and effect.
Levi Watterson	owner)	Kermadine E	arton			
16B, CONTRACTOR/OFFEROR	15C. DATE SIGNI	1 1 1			16C. DATE	
Jen J. Watterson (Signature of person authorized to sign	n) 4/22/00		of Contracting (Sourtvn Officer)	4/16	6/2008
NSN 7540-01-152-8070 Previous edition unusable		30-105			GSA.	(REV. 10-83)

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MAY. 28. 2008_10:11AMUS	BANK BR 123			V-10	NO. 4960_	P. 2
AMENDMENT OF SOLICITA		N OF CONTRACT	1. CC	T ID	CODE	Frue OF PAGES
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHA	SE REQ.	NO.	5. PROJECT NO	O. (If applicable)
Amendment No. 2	05/21/2008					
6. ISSUED BY CODE	;	7. ADMINISTERED BY (If o	otter than i	Itam 6)	CÓDE	
USDA FOREST SERVICE FIRE PROCUREMENT SPECIALIS 2164 NE SPALDING AVENUE GRANTS PASS, OR. 97526						ATT A PLANTA
8. NAME AND ADDRESS OF CONTRACTOR (N	o., street, county, State, er	nd ZIP Code)	(X)	ga. AMEN	IDMENT OF SOLK	CHATION NO.
Levi Watterson Contra	rc ting		57	AG-0	4H1-\$-8-9004	
P.O. Box 604 John Day, OR 97845 677 West Main Sp#130					D (SEE ITEM 11)	
John Day, OR 97845		·		03/20		NTRACT/ORDER NO.
677 West Main Sp#130				TUA, MOL	MPICATION OF CC	MINACIONDER NO.
,				10B, DAT	ED (SEE ITEM 13)	
CODE F	ACILITY CODE				•	
11. THIS	TEM ONLY APPLI	ES TO AMENDMENTS	OF SOL	ICITAT	IONS	
The above numbered solicitation is ame	ended as set forth in iter	m 14. The hour and date s	pecified t	for receipt	of Offers X is	extended,
					is	not extended.
Offers must acknowledge receipt of this ame methods:	endment prior to the hor	ur and date specified iπ the	solicitati	on or as a	imended, by one	of the following
(a) By completing Items 8 and 15, and return offer submitted;	ning 1 copies of the am	endment; (b) By acknowle	dging red	ceipt of thi	s amendment or	n each copy of the
or (c) By separate letter or telegram ACKNOWLEDGMENT TO BE RECEIVED SPECIFIED MAY RESULT IN REJECTION change may be made by telegram or letter, prior to the opening hour and date specified.	AT THE PLACE DESI OF YOUR OFFER. If provided each telegran	GNATED FOR THE RECE by virtue of this amendmen	at vou de	OPPERS	ange an offer all	ready submitted, such
12. ACCOUNTING AND APPROPRIATION DATA	(if required)					
13. THIS ITEM	APPLIES ONLY TO	O MODIFICATIONS OF T/ORDER NO. AS DES	CONTRACTOR	RACTS/C	ORDERS, M 14	
(X) A. THIS CHANGE ORDER IS ISS	SUED PURSUANT TO:	(Specify authority) THE C	HANGE	S SET FO	ORTH IN ITEM 1	4 ARE MADE IN
THE CONTRACT ORDER NO	. IN ITEM 10A.					
B. THE ABOVE NUMBERED CO	NTRACT/ORDER IS M	ODIFIED TO REFLECT T	HE ADM	INISTRA	TIVE CHANGES	(such as changes in
paying office, appropriation date, e	EMENTIS ENTERED	EM 14, PURSUANT TO IT	HORIT	7 OF:	7F FAIX 43. 103(L	·/·
C. THIS GOFFLEWENTAL AGNE	EMENT TO ENTER EN			. •		
D. OTHER (Specify type of modifi	cation and authority)					
E. IMPORTANT: Contractor is	not, 🛛 is required	to sign this document a	nd retu	m <u>1</u> copi	es to the issuir	ig office.
14. DESCRIPTION OF AMENDMENT/MODIFICA	TION (Organized by UCF :	section headings, including soll	citation/c	ouaect sool	ect mener waste t	easine.
This amendment is to acknowledge clarification, there are no changes to	that a decision has	s been made not to ch ss "C" Certified Faller.	ange th	e origin	al solicitation	. Based on
Qualifications must be meet in Exhi				l for a Tv	vpe 2 Class "(C" Failer.
The Closing Date of this Solicitation					•	
-		*				
Attached is the Scheduled of Items						
Except as provided herein, all terms and conditions 15A. NAME AND TITLE OF SIGNER (Type or print	of the document reference t)	ed in Item 9A or 10A, as hereto 16A. NAME AND TI	fore char TLE OF (nged, remai CONTRACT	ins unchanged and TING OFFICER (T)	I in full force end effect. /pe or print)
Levi Watterson (Own	ier)	Kermadine E				
15B. CONTRACTOR/OFFEROR	15C. DATE SIGN	NED 16B. UNITED STAT	ES OF A	MERICA	rtin	16C, DATE SIGNED
Len J. Watterson	5/28/	durma (Sinnahir		tracting C		5/21/2008
(Signature of person authorized to sign, NSN 7540-01-152-8070		30-105 (Signatur	e or our	needily /	STANDARD	FORM 30 (REV. 10-83)
Previous edition unusable					Prescribed by PAR (48 CFI	

Schedule of Items

- 1	ſ			**************************************
	Item 1	Type 1 Professional Single Faller	Daily Rate	s_1,200
	Item 2	Type 1 Professional Faller Module (2 Fallers)	Daily Rate	\$2,100
	Item 3	Type 2 Single Class C Certified Faller	Daily Rate	\$
	Item 4	Type 2 Class C Certified Faller Module (2 Fallers)	Daily Rate	\$

Company Name	1/0. (1) 1/
DUNS Number	147361039 Contracting
Contact Name	
E-Mail Address	Levi-jax Dyahoo. com
Phone Numbers (up to 6)	1041 160-7519 (541)575-0049
Fax Number	(503)313-7211 (541)620-0300
Mailing Address	Street: P.O. Box 604
	City/State John Day OR Zip: 97845

Complete the following as a roster of <u>all</u> proposed fallers. (Attach additional sheets as necessary: Please ensure all pages are appropriately marked with the solicitation number and vendor name.)

Faller Name	Туре	City/State(Identify the dispatch location (city/state) for each if different than the offeror's address)
Levi Watterson	Professional [] Class "C"	
usty Watterson	□ Professional [] Class "C"	
	[] Professional [] Class "C"	John Day OR
	[] Professional [] Class "C"	
	[] Professional [] Class "C"	
	[] Professional [] Class "C"	·
	[] Professional [] Class "C"	
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	[] Professional [] Class "C"	

Type 1 Professional Faller Module:	modules available
(Identify each faller module with a unique resource nu	mber/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)
WATTERSON 1	John Day OR 97845
Type 2 Class C Faller Module: (Identify each faller module with a unique resource nu	City/State(Identify the dispatch location (city/state) for each if
Type 2 Class C Faller Module: (Identify each faller module with a unique resource nu Equipment ID (Resource Number/Name)	mber/name for identification purposes).
(Identify each faller module with a unique resource nu	mber/name for identification purposes). City/State(Identify the dispatch location (city/state) for each if
(Identify each faller module with a unique resource nu	mber/name for identification purposes). City/State(Identify the dispatch location (city/state) for each if
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(Identify each faller module with a unique resource nu	mber/name for identification purposes). City/State(Identify the dispatch location (city/state) for each if
(Identify each faller module with a unique resource nu	mber/name for identification purposes). City/State(Identify the dispatch location (city/state) for each if

- X I certify that all fallers proposed under this solicitation meet the training and experience requirements stated in D.3.1
- 2. XI I certify that all fallers proposed under this solicitation are covered by Workman's Compensation or a legal exemption.
- I am [2] am not [3] registered in the Contractor Central Registration (CCR) system.

 I have [2] have not [3] completed my representations and certifications on-line (Ref. E.3)