

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS Offeror To Complete Block 12, 17, 23, 24, & 30				1. Requisition Number SEE SCHEDULE		Page 1 Of 4				
2. Contract No. W56HZV-04-D-B830		3. Award/Effective Date 2004SEP30		4. Order Number 0002		5. Solicitation Number		6. Solicitation Issue Date		
7. For Solicitation Information Call:		A. Name MARIA KRAUS			B. Telephone Number (No Collect Calls) (586)574-7479		8. Offer Due Date/Local Time			
9. Issued By TACOM WARREN AMSTA-AQ-ADBA WARREN, MICHIGAN 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL e-mail: KRAUSM@TACOM.ARMY.MIL			Code W56HZV		10. This Acquisition Is <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Hubzone Small Business <input type="checkbox"/> 8(A) NAICS: 333120 Size Standard:			11. Delivery For FOB Destination Unless Block Is Marked <input type="checkbox"/> See Schedule		12. Discount Terms
15. Deliver To SHIPPING INSTRUCTIONS FOR CONSIGNEE (SHIP-TO) WILL BE FURNISHED PRIOR TO THE SCHEDULED DELIVERY DATE FOR ITEMS REQUIRED UNDER THIS REQUISITION. Telephone No.			Code Y00000		16. Administered By DCMA VIRGINIA 10500 BATTLEVIEW PKWY SUITE 200 MANASSAS VA 20109-2342					Code S2404A
17. Contractor/Offeror INDEPENDENT SYSTEMS, INC. 1850 COLUMBIA PIKE #203 ARLINGTON,, VA. 22204-6221 Telephone No. (703)892-4505			Code 0C182		Facility		18a. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264			Code HQ0338
<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	
	SEE SCHEDULE									
	(Use Reverse and/or Attach Additional Sheets As Necessary)									
25. Accounting And Appropriation Data ACRN: AA 2111 4109601034CPCP01041000025FB S40044 S40044						26. Total Award Amount (For Govt. Use Only) \$761,850.00				
<input 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 type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.						<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 type="checkbox"/> 28. Contractor Is Required To Sign This Document And Return _____ 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 Herein.					<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) M. J. FRANZEN /SIGNED/ FRANZENM@TACOM.ARMY.MIL (586)574-6304			31c. Date Signed		

19. Item No.	20. Schedule Of Supplies/Services	21. Quantity	22. Unit	23. Unit Price	24. Amount

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 (Print)	
41b. Signature And Title Of Certifying Officer	41c. Date	
	42b. Received At (Location)	
	42c. Date Rec'd (YY/MM/DD)	42d. Total Containers

CONTINUATION SHEET

Reference No. of Document Being Continued
 PIIN/SIIN W56HZV-04-D-B830/0002 MOD/AMD

Name of Offeror or Contractor: INDEPENDENT SYSTEMS, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0831	SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 9999-99-083-0083 FSCM: CPAIQ PART NR: 83FORKLIFT,INDUST.,5TCAP,D SECURITY CLASS: Unclassified				
0831AA	<p><u>FIRST ORDERING PERIOD</u></p> <p>NOUN: FORKLIFT 5 TON, EXPLOSIVE PRF PRON: EH4W0294EH PRON AMD: 01 ACRN: AA AMS CD: 04100000000 CUSTOMER ORDER NO: W915WE41770290</p> <p>NOUN: FORKLIFT DAEWO MODEL D50C, FITTED WITH ESSENTIAL EQUIPMENT, IN ACCORDANCE WITH THE CONTRACT SPECIFICATIONS AT C.1, ATTACHED AS ATTACHMENT 001, AND THE INCORPORATED TECHNICAL INFORMATION QUESTIONNAIRE, ATTACHMENT 002.</p> <p>EACH FORKLIFT SHALL BE OVERPACKED WITH THE CONTRACTOR'S AVAILABLE OPERATOR MANUAL (ANY LANGUAGE).</p> <p>CONTRACTOR MUST PROVIDE AN ENGLISH AND ARABIC (DIALECT APPROPRIATE TO IRAQ) MANUAL (IN ACCORDANCE WITH C.2) WHICH IS INCLUSIVE OF THE PROPOSED UNIT PRICE.</p> <p>VEHICLES CAN BE AND WILL BE EXPECTED TO BE SHIPPED WITH THE AVAILABLE VEHICLE'S STANDARD MANUAL, IN WHATEVER LANGUAGE, BUT THE CONTRACTOR WILL BE PAID ONLY 80% OF THE TOTAL COST PER VEHICLE UPON ACCEPTANCE IF THE TWO REQUIRED LANGUAGE MANUALS ARE NOT INCLUDED WITH THE ORIGINAL SHIPMENT.</p> <p>WHEN ENGLISH AND ARABIC TRANSLATED MANUALS ARE PROVIDED, (ONE OR BOTH, WHATEVER COMPLETES THE REQUIREMENT OF BOTH MANUAL TYPES), THE ADDITIONAL 20% OF THE UNIT PRICE, PER VEHICLE, WILL BE PAID UPON ACCEPTANCE OF THE MANUALS.</p> <p style="text-align: center;">(End of narrative B001)</p> <p><u>Packaging and Marking</u></p> <p>STANDARD COMMERCIAL PRACTICE FOR SAFE DELIVERY TO BASRAH.</p> <p style="text-align: center;">(End of narrative D001)</p>	9	EA	\$ 84,650.00000	\$ 761,850.00

CONTINUATION SHEET

Reference No. of Document Being Continued

PIIN/SIIN W56HZV-04-D-B830/0002 **MOD/AMD**

Name of Offeror or Contractor: INDEPENDENT SYSTEMS, INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/ <u>ITEM</u>		OBLG <u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	JOB ORDER <u>NUMBER</u>	ACCOUNTING <u>STATION</u>	OBLIGATED <u>AMOUNT</u>
0831AA	EH4W0294EH	AA	1	2111 4109601034CPCP01041000025FB S40044		S40044 \$	761,850.00
	04100000000						
	W915WE41770290						
						TOTAL \$	761,850.00

<u>SERVICE NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>	ACCOUNTING <u>STATION</u>	OBLIGATED <u>AMOUNT</u>
Army	AA	2111 4109601034CPCP01041000025FB S40044	S40044	\$ 761,850.00
			TOTAL	\$ 761,850.00