



VEY CONTRACT RENEWAL ANALYSIS MEMORANDUM

CURRENT CONTRACTOR(S)/(Names/Address)

1 Alta Equipment Co.

28775 Beck Rd.

Wixom, Mi. 48393

3

CONTRACT DESCRIPTION

Service, Parts and Repair For Caterpillar Parts

Date: 12-18-2015
Oracle P.O. 2873346

RFQ Number 43359

Est. Value: \$579,388+(\$200,000)=\$ 779,388

No. of Contractors: 1

Exp. Date: 12-31-2015

Ext. Period: Upon CC Approval

To: 12-31-2016

Using Dept(s) GSD
Orig. JCC Date 12-17-2015
New JCC Date:

PREVIOUS BIDDERS

Bid # (if more than one, reference contractor number from above)	Best Fuel Service Inc.		Previous Bid	Current Price						
	Previous Bid	Current Price								
1 Pricing	Same	Same								
3										
4										
5										

COMMENTS (Use reverse side if necessary)

Both the Department and Vendor wish to renew this contract. It is in the best interest of the City to renew this contract.

RECOMMENDATION AND APPROVALS *Only one approval is required from either the Principal or Purchase Manager

Rebid
 Renew

Purchases Agent No. of Contracts _____
 Team Leader No. of Contracts _____
 *Principal, or No. of Contracts _____
 *Head Purchase Agent No. of Contracts _____
 Purchasing Director No. of Contracts 1

Signature: 
 Date: 01/07/16

Current pricing is a cost reduction Potential cost savings \$ _____

ACCT : 1000-470100-006004-622100-12153-000000- A4510 \$25,000.00

ACCT : 3401-190415-000041-622100-12397-000000- A4510 \$150,000.00

ACCT : 1000-470120-006004-617900-121253-000000- A4510 \$25,000.00

BID TABULATION

Supplier 1				Supplier 2				Supplier 3			
ASSUMPTIONS				ASSUMPTIONS				ASSUMPTIONS			
	UNITS	UNIT PRICE	TOTAL PRICE		UNITS	UNIT PRICE	TOTAL PRICE		UNITS	UNIT PRICE	TOTAL PRICE
D-BB's				D-BB's				D-BB's			
D-RB's				D-RB's				D-RB's			
D-BB's w/HQ in Detroit				D-BB's w/HQ in Detroit				D-BB's w/HQ in Detroit			
D-BSB's				D-BSB's				D-BSB's			
D-BMBC				D-BMBC				D-BMBC			
Joint Venture				Joint Venture				Joint Venture			
Mentor Venture				Mentor Venture				Mentor Venture			
ALTA EQUIPMENT CO. 28775 BECK RD. WIXOM, MI. 48393 ATTN: ROBERT CHILLES											
LABOR RATE : \$100/HR O.T. & SATURDAY : 100/HR											
PARTS											
10% DISCOUNT FROM MFG.											
List Price											
Purchase order TOTAL											
UP TO \$10,000.00											
\$10,000.01-\$100,000.00											
\$100,000.01-\$500,000.00											
\$500,000.01 AND OVER											
D-RB's											
D-BB's w/HQ in Detroit											
D-BSB's											
D-BMBC											
Joint Venture											
Mentor Venture											
BID TABULATION GRAND TOTAL:			\$0.00	BID TABULATION GRAND TOTAL:			\$0.00	BID TABULATION GRAND TOTAL:			\$0.00

CITY OF DETROIT

ACCOUNTS RECEIVABLE CLEARANCE APPLICATION
2 WOODWARD AVENUE, SUITE 105, COLEMAN A YOUNG MUNICIPAL CENTER
REVENUE COLLECTIONS UNIT (313) 224-4087 / FAX: 224-4238 / RevenueCollections@DetroitMi.gov

- SECTION A: BUSINESS LICENSE BUDGET CITY COUNCIL DDOT DPW FINANCE FIRE HEALTH
 HUMAN RIGHTS LAW MAYOR OMBUDSMAN PLANNING & DEVELOPMENT POLICE PURCHASING
 RECREATION WATER & SEWAGE OTHER _____

ADDRESS OF DEPARTMENT _____
 DATE SENT 1-8-2015 CONTACT PERSON Howard Hughes
 PHONE NUMBER _____ FAX NUMBER _____ EMAIL _____
 CONTRACT AMOUNT \$ 779,338

SECTION B: CORPORATION LICENSE TYPE _____
 CORPORATION NAME Alta Equipment
 ADDRESS 29115 Beck Rd CITY/STATE/ZIP Wixom MI OWN LEASE
 CITY PERSONAL PROPERTY NUMBER _____ FID / EIN NUMBER 38-3308050
 OTHER CITY-OWNED PROPERTY PARCELS _____
 CONTACT PERSON Bryan & Walt PHONE NUMBER 248-356-5700 EMAIL ADDRESS _____

SECTION C: PARTNERSHIP LICENSE TYPE _____
 BUSINESS NAME _____
 BUSINESS ADDRESS _____ CITY/STATE/ZIP _____ OWN LEASE
 CITY PERSONAL PROPERTY NUMBER _____ FID / EIN NUMBER _____
 A: PARTNER'S NAME _____ PHONE NUMBER _____
 HOME ADDRESS _____ CITY/STATE/ZIP _____ OWN LEASE
 DRIVER'S LICENSE # _____ OTHER CITY-OWNED PROPERTY PARCELS _____
 B. PARTNER'S NAME _____ PHONE NUMBER _____
 HOME ADDRESS _____ CITY/STATE/ZIP _____ OWN LEASE
 DRIVER'S LICENSE # _____ OTHER CITY-OWNED PROPERTY PARCELS _____
 CONTACT PERSON _____ PHONE NUMBER _____ EMAIL ADDRESS _____

SECTION D: SOLE PROPRIETORSHIP LICENSE TYPE _____
 BUSINESS NAME _____
 BUSINESS ADDRESS _____ CITY/STATE/ZIP _____ OWN LEASE
 CITY PERSONAL PROPERTY NUMBER _____ FID / EIN NUMBER _____
 OWNER'S NAME _____ DRIVER'S LICENSE # _____ PHONE NUMBER _____
 HOME ADDRESS _____ CITY/STATE/ZIP _____ OWN LEASE
 OTHER CITY-OWNED PROPERTY PARCELS _____
 EMAIL ADDRESS _____

SECTION E: PERSONAL SERVICES
 NAME _____ ADDRESS _____ OWN LEASE
 CITY/STATE/ZIP _____
 PHONE NUMBER _____ DRIVER LICENSE # _____
 OTHER PROPERTY ADDRESSES OWNED IN WITHIN DETROIT _____
 SOCIAL SECURITY NUMBER _____ EMAIL ADDRESS _____

**REVENUE COLLECTIONS
 APPROVED
 CONTRACT CLEARANCES**

FOR TRUCKS & COLLECTION DUE ONLY!

APPROVED [Signature] DENIED _____ DENIED WITH ATTACHMENTS _____
 SIGNATURE _____ DATE JAN 08 2016 CLEARANCE VALID UNTIL AUG 31 2016

DEC 15 2015

HOWARD 313-224-4617
Hughes



REQUEST FOR INCOME TAX CLEARANCE

REQUESTING DEPARTMENT/DIVISION: PURCHASING/FINANCE

E-MAIL ADDRESS: hughes.h@detroitmi.gov

CONTACT NAME: H. Hughes PHONE: 313-224-4617

Type of Clearance: New Renewal (Please submit 30 days prior to submitting bid or expiration date)

To:
A. City of Detroit
Income Tax Division
Coleman A. Young Municipal Center
2 Woodward Avenue, Ste. 512
Detroit, MI 48226

For:
Individual or
Company Name ALTA Equipment Co.
Address 28775 Beck Rd.

Phone: (313) 224-3328 or 224-3329
Fax: (313) 224-4588

City Wixom MI 48393
State Mich Zip Code 48393
Telephone 248-356-5200 Fax # 248-356-2029

E-mail Address _____

B. Name of Chief Financial Officer/Authorized Contact Person
(Include address if different from above)
RYAN GREENWALT

Telephone # 248-356-5200
Fax # 248-356-2029

Employer Identification or Social Security Number
38-7308050

Spouse Social Security Number _____

Nature of Contract EQUIPMENT PURCHASES

BID CONTRACT AMOUNT (if known):
Labor: \$ _____ Material: \$ _____
Contract # (if known) _____

C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.

Check One: Individual Corporation Partnership Estate & Trust

INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

- 1. Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above) Yes No
- 2. Are you a student, and/or claimed as a dependent on someone else's tax return? Yes No
- 3. Were you employed during the last seven (7) years? Yes No
- 4. Were you a resident of Detroit during the last seven (7) years? Yes No

CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

- 5. Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS-4). Yes No
- 6. Will the company have employees working in Detroit? Yes No
- 7. Will the company use sub-contractors or independent contractors in Detroit? Yes No

D. FOR INCOME TAX USE ONLY

Has the contractor complied with the provisions of the City Income Tax Ordinance?

Yes No Signature [Signature] Date NOV 06 2015 Expires NOV 06 2015

Yes No Signature [Signature] Date DEC 17 2015 Expires DEC 17 2016

Yes No Signature _____ Date _____ Expires _____

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: www.detroitmi.gov

NOTE: An approved Income Tax Certificate may be used in multiple city wide departments that require a bid. Please e-mail your completed request form (preferably in pdf format) to: IncomeTaxClearance@detroitmi.gov

COVENANT OF EQUAL OPPORTUNITY
(Application for Clearance - Terms Enforced After Contract is Awarded)

I, being duly authorized representative of the Alta Construction Equipment Co., LLC, (hereinafter "Contractor"), do hereby enter into a Covenant of Equal Opportunity (hereinafter "Covenant") with the City of Detroit, ("hereinafter" City); obligating the Contractor and all sub-contractors not to discriminate against any employee or applicant for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his or her hire, promotion, job assignment, tenure, terms, conditions or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression.

I understand that it is my responsibility to ensure that all potential sub-contractors are reported to the City of Detroit Human Rights Department and have a current *Contract Specific Clearance* on file prior to working on any City of Detroit contract. I further understand that the City of Detroit reserves the rights to require additional information prior to, during, and at any time after the Clearance is issued.

Furthermore, I understand that this covenant is valid for the life of the contract and that a breach of this covenant shall be deemed a material breach of the contract and subject to damages in accordance with the City of Detroit Code, Ordinance No. 27-3-2, Section (e).

RFQ/PO No. _____

Printed Name of Contractor: Alta Construction Equipment Co., LLC

(Type or Print Legibly)

Contractor Address: 28775 Beck Road Wixom, MI, 48393
(City) (State) (Zip)

Contractor Phone/E-mail: 248.368.6200 / brian.stlouis@altaequipment.com
(Phone) (E-mail)

Printed Name & Title of Authorized Representative: Brian St. Louis

Signature of Authorized Representative: _____

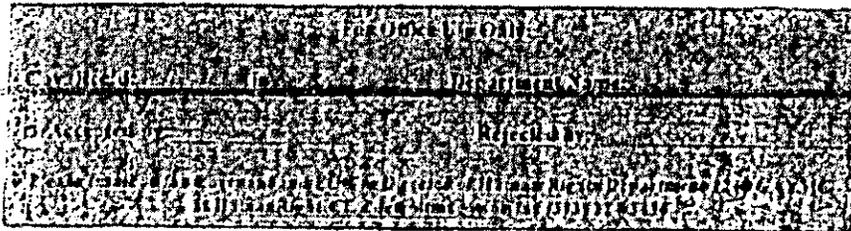
Date: 11/6/14

*** This document **MUST** be notarized ***

Signature of Notary: _____

Printed Name of Seal of Notary: Michelle A. Maynarich

My Commission Expires: 08 / 23 / 2020



Hiring Policy Compliance Affidavit

I, Brian StLouis, being duly sworn, state that I am the Director
Product Support of NAPA Equipment Company LLC
Title

and that I have reviewed the hiring policies of this employer. I affirm that these policies are in compliance with the requirements of Article V, Division 6 of the Detroit City Code of 1984, being Sections 18-5-81 through 18-5-86 thereof. I further affirm that this employer will not inquire or consider the criminal convictions of applicants for employment needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted, until such times as the employer interviews the applicant or determines that the applicant is qualified.

In support of this affidavit, I attach a copy of the application form that will be used to hire employees needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted.

SIGNED



Title: Director Product Support Date: 11/16/14

STATE OF MICHIGAN)
COUNTY OF Oakland) SS

The foregoing Affidavit was acknowledged before me the 16th day of Nov, 2014
by Michelle Maynard

Notary Public, County of Wayne
State of Michigan
My commission expires: 8/23/2020



MICHELLE A. MAYNARD
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES Aug 23, 2020
ACTING IN COUNTY OF Oakland



City Council Contract Agenda Items Review Checklist

Reviewer: (_____) Date Received: _____

Date: 12/15/15 Department General Services Division: Fleet Management

Dept Head/Contact Person: Ed Porche Phone No.: 628-0910

Description: Repair Service, Parts and/or Labor Caterpillar Engines.

Contract No.: 2873346 PO Type: CPO Est. Value: \$200,000.00 Increase

Contract Term (if applicable): 1/1/16 to 12/31/16

Funding: City 100% State _____% Federal _____% Other: _____ %
(Documentation must be furnished by the Dept. if anything other than City funding)

Recommended Supplier: Alta Equipment Co. Required Date: 1/1/16

1. The business being awarded is RENEWAL If a renewal, provide justification for renewal: _____

2. Was the product or service competitively bid? Yes No
Attach Copy of Bid Tabulation/Evaluation score sheets as needed
If the answer to #2 is "NO" explain why there was no competition: _____

3. Was a Co-Operative Agreement Considered? Yes No Co-Operative Name: _____
If answer to #3 is "No" explain why a Co-Op was not considered: N/A

4. Were savings achieved?
 Yes Amount \$ _____ No

5. Does this agreement represent an increase? YES
 Variance in unit price only (Current unit price \$0.00 Proposed Unit Price \$0.00)
 Change in amount/volume of the good or service to be used. Increase in Repair Service .



6. Does the supplier currently provide other goods and services to the City? Yes No
If yes please list: Equipment Repair Services

7. Is this good/service used by other departments? Yes No
If "yes" can this Req/PAR be combined other department requirements? Yes No

8. Is this a service that can be performed by City employees? Yes No
Is this a service that City employees can be trained to do? Yes No

NOTES: Buyer:

a. Excluded Parties List / Supplier Award Management Website Reviewed? Yes ___ No ___

PLACE ON EMERGENCY MANAGER AGENDA

PLACE ON CITY COUNCIL AGENDA

REJECT AND NOTIFY DEPARTMENT DIRECTOR:

SIGNED: Ed Porche DATE: 12/15/15
(Department)

INFORMATION PROVIDED BY: Ed Porche

TITLE: Contracts Manager

PHONE: 628-0910

**CITY OF DETROIT
SLAVERY ERA RECORDS AND INSURANCE DISCLOSURE AFFIDAVIT**

- 1. Name of Contractor: Alta Construction EQUIPMENT LLC
- 2. Address of Contractor: 28775 Beck Rd
Wixom MI 48393
- 3. Name of Predecessor Entities (if any): _____

- 4. Prior Affidavit submission? No Yes, on: _____
(Date of prior submission)

If "No", complete Items 5 and 6.

If "Yes", list date of prior submission above, go to Item 6 and execute this Affidavit.

- 5. Contractor was established in 1984 (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

Contractor has searched their records and those of any predecessor entity, and has found no records that they or any predecessor(s) made any investments in, or derived profits from the slave industry or from slave holder insurance policies.

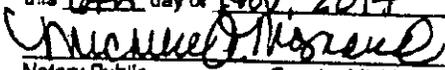
Contractor has found records that they or their predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

- 6. I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge. All documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

Brian St. Louis (Printed Name) Director Product Support

 (Signature) 11/06/14 (Date)

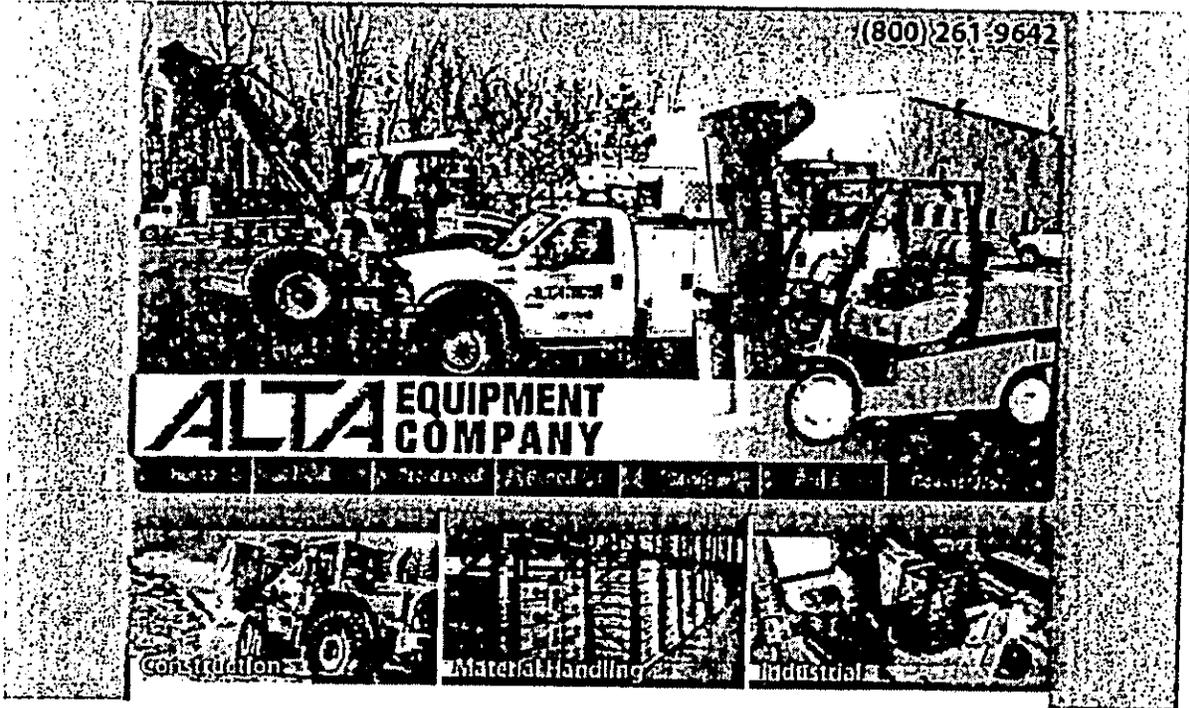
Subscribed and sworn to before me
this 6th day of Nov, 2014



Notary Public, _____ County, Michigan

My Commission expires: 8/23/2020

MICHELLE A. HAYMARICH
NOTARY PUBLIC, STATE OF MI
COUNTY OF WAYNE
MY COMMISSION EXPIRES Aug 23, 2020
I AM IN COUNTY OF Oakland



Job Opportunities

Resume Submission

Thank you for your interest. Please complete the required fields below in order to be considered for future opportunities.

Please take a few minutes to fill out our application form. Required Fields are denoted with a "*".

Personal Information

* First Name

* Last Name

* Email

Attachments

* Resume

Cover Letter

Other

We accept DOC, DOCX, XLS, XLSX, PPT, PPTX, CSV, HTML, PDF, RTF and TXT.
Please do not submit password-protected/encrypted documents.
The maximum allowed file size is 5MB.

Current Address

* Address

Address #2

* City

* State

* Zip/Postal Code

* Country

Contact Information

* Cell Phone

Home Phone

• Preferred First Name
• Please provide your Middle Name or Middle Initial for identification purpose in the event of hire

Employment Information

• How did you hear about us?

Please specify, if applicable:

If referred by an Alta employee, please list their name:

• Are you 18 years of age or older?
 Yes No

• Are you legally authorized to work in the United States? (Proof of citizenship or immigration status will be required upon employment.)
 Yes No

• Are you currently employed?
 Yes No

• Are you available to work:
 Full Time
 Part Time
 Shift Work
 Temporary

On what date would you be available for work?

Can you travel if the job requires it?
 Yes No

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job will be supplied upon request.
 Yes No

Education

• Name & Location of High School:

• Diploma/GED? Yes No

Name & Location of Undergraduate College:

Course of Study/Major:

Years Completed:

Diploma/Degree Received:

Name & Location of Graduate College:

Course of Study/Major:

Years Completed:

Diploma/Degree Received:

Name & Location of Other (please specify):

Course of Study/Major:

Years Completed:

Diploma/Degree Received:

Please list any other relevant training (certifications, advance coursework, military, etc.) that you have received:

Employment Experience

Please list your current/most recent employer.

- Employer Name:
- Address:
- Job Title:
- Supervisor:
- Start Date (MMYY):
- End Date (MMYY):
- Starting Hourly Rate/Salary:
- Final Hourly Rate/Salary:
- Work Performed:
- Reason for Leaving:

Applicant's Statement

I represent that the answers and information given by me in this application are true and complete. I acknowledge that any false, inaccurate or misleading information may result in refusal to hire or dismissal once the facts become known.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand that Alta Equipment Company will conduct a background check after an employment offer is accepted. Any employment with Alta Equipment Company is contingent upon the successful completion of a background check, including but not limited to employment history, criminal, education, and motor vehicle records. Also, all employment offers are contingent upon the successful completion of a drug screen and physical.

By signing this form electronically, I agree that all information contained is accurate.

• I have read and agree to this disclaimer

• Applicant Signature:

• Date:

Comments

U.S. Equal Employment Opportunity/Affirmative Action Information
Individuals seeking employment are considered without regards to race, color, religion, national origin, age, sex, marital status, ancestry, physical or mental disability, veteran status, or sexual orientation. You are being given the opportunity to provide the following information in order to help us comply with federal and state Equal Employment Opportunity/Affirmative Action record keeping, reporting, and other legal requirements.

Please Note: Completion of this form is voluntary. Completion of the form is entirely voluntary. Whatever your decision, it will not be considered in the hiring process or thereafter. Any information that you do provide will be recorded and maintained in a confidential file.

Gender:

- Male
- Female
- Declined to Self-Identify

Ethnicity/Race:

- Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.
- Declined to Self-Identify

Veteran Status:

- Veteran
 - Recently Separated Veteran
 - Armed Forces Service Medal Veteran
 - Other Protected Veteran
- Not a Veteran
- Declined to Self-Identify

Submit

[Back To Jobs](#)

applicant tracking system by
newton
applicant privacy policy



Search Results

Current Search Terms: Alta* equipment* Co

<p>Notice: This printed document represents only the first page of your SAM search results. More results may be available. To print your complete search results, you can download the PDF and print it.</p> <p>No records found for current search.</p>
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Glo

Search

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Exclu

Search

Filter

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Area
Mana

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Area
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Infor

SAM | System for Award Management 1.0

IBM v1.P.40.20151201-1827

Note to all Users: This is a Federal Government computer system. Use of this system constitutes consent to monitoring at all times.



Attachments

Main	Source	Description	Data Type	May Be Changed
10	To Buyer	CONTRACT RENEWAL	Short Text	<input checked="" type="checkbox"/>
20	To Buyer	PAR	File	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Entity Name: REQ Header

WE ARE REQUESTING RENEWAL OF CPO #2873346 FOR REPAIR SERVICE, LABOR AND/OR PARTS CATEPILLAR ENGINES FOR ONE (1) YEAR TO DECEMBER 31, 2016. CONTRACT WILL EXPIRE DECEMBER 31, 2015. NEED AN ADDITIOANL YEAR OF SERVICE CATEPILLAR ENGINE REPAIRS.

ACCOUNT STRINGS: TOTAL RENEWAL AMOUNT \$200,000.00
1000-470100-006004-622100-12153-000000-A4510 \$25,000.
3401-190415-000041-622100-12397-000000-A4510 \$150,000.00
1000-470120-006004-617900-121253-000000-A4510 \$25,000.00

IF YOU HAVE QUESTIONS, PLEASE CONTACT ED PORCHE 628-0910.

Include Related Documents

Publish to Catalog

Document Catalog...



CITY OF DETROIT
 FINANCE DEPARTMENT
 PURCHASING DIVISION
 1008 COLEMAN A. YOUNG
 MUNICIPAL CENTER
 DETROIT, MICHIGAN 48226
 PHONE 313-224-4600
 FAX 313-224-4374

**IF THIS PURCHASE ORDER
 DOES NOT AGREE WITH THE
 BID YOU SUBMITTED,
 PLEASE CONTACT THE
 PURCHASING DIVISION.**

Purchase Order

PURCHASE ORDER NO. 2873346 REVISION 2 PAGE 1

THE ABOVE NUMBER MUST APPEAR ON ALL INVOICES AND SHIPMENTS.

SHIP TO
 18100 Meyers
 Detroit, MI 48235
 United States

BILL TO
 Coleman A Young Municipal Ce
 2 Woodward Avenue
 Ste 642
 Detroit, MI 48226
 United States

SUPPLIER

ALTA EQUIPMENT COMPANY INC
 28775 BECK ROAD
 WIXOM, MI 48393

SUPPLIER NO. 1119665	DATE OF ORDER/BUYER 04-DEC-12 W Hansbrough	REVISED DATE/BUYER 06-JAN-16 H Hughes
PAYMENT TERMS Net 45	SHIP VIA Unspecified	F.O.B. Delivered
FREIGHT TERMS Your Delivery	REQUESTOR/DELIVER TO	CONFIRM TO / TELEPHONE D TANNER (248) 449-6700

LINE	ITEM NUMBER / DESCRIPTION	DELIVERY DATE	QUANTITY	UNIT	UNIT PRICE	EXTENSION	TAX
	<p>THIS PURCHASE ORDER WAS CREATED IN ACCORDANCE WITH PERIOD AGREEMENT AND RFQ #43359.</p> <p>CCR: DECEMBER 17, 2012</p> <p>FURNISH: REPAIR SERVICE, LABOR, AND/OR PARTS, GENUINE, CATERPILLAR ENGINES</p> <p>RENEWAL: ONE (1) RENEWAL REMAINING.</p> <p>WARRANTY:</p> <p>ALL REPAIR WORK AND PARTS SHALL BE FULLY GUARANTEED AGAINST DEFECTS IN PERFORMANCE FOR ONE HUNDRED EIGHTY (180) DAYS UPON COMPLETION OF REPAIRS.</p> <p>TERMINATION OF CONTRACT: The City reserves the absolute right to terminate this contract in whole or in part for the convenience of the City at its sole discretion on thirty (30) days written notice to the Vendor.</p> <p>It is the vendor's responsibility to mail or cause to be delivered a valid original invoice to Finance, Accounts Payable Section with a photographic copy to the contracting officer designated within the contract or purchase order. It is the delivery of this document that initiates the start of the 45-day count under the prompt payment ordinance. The mailing of duplicate original invoices is strictly prohibited.</p> <p>A valid invoice meets the following requirements:</p> <p>Vendor Information: Full name of business, Federal Identification Number, unique invoice number, date of invoice, reference to City of Detroit</p>						
Total						779,388.00	

CONTRACTS AND PURCHASES BETWEEN THE VENDOR AND THE CITY OF DETROIT ARE SUBJECT TO FEDERAL, STATE AND LOCAL LAWS INCLUDING, BUT NOT LIMITED TO, EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION. THE CITY MAY TERMINATE THE CONTRACT FOR CAUSE OR CONVENIENCE. NO CHANGES EFFECTIVE UNLESS AGREED TO IN WRITING BY CONTRACT AMENDMENT. ONLY SUCH GOODS WILL BE PAID FOR AS COMPLY EXACTLY WITH WRITTEN DESCRIPTION. WHEN SHIPPED VIA COMMON CARRIER, MAIL SHIPPING NOTICE DIRECTLY TO RECEIVING POINT. CASH TERMS DATE FROM RECEIPT AND ACCEPTANCE OF GOODS AND CORRECT INVOICE. PATENTS-CONTRACTORS SHALL PROTECT AND INDEMNIFY AGAINST EXPENSE OF ANY NATURE, SHALL BEAR COST OF ANY SUITS WHICH MAY ARISE, AND SHALL PAY ALL DAMAGES WHICH MAY BE AWARDED AGAINST THE CITY FOR THE USE UNDER THIS SPECIFICATION OF ANY PATENTED DEVICE, PROCESS, APPARATUS, MATERIAL OR INVENTION. THE CITY RESERVES THE RIGHT TO AUDIT EMPLOYEE PAYROLL RECORDS TO VERIFY LABOR CHARGES UPON 72 HOURS NOTICE.

DocuSigned by:
Boysie Jackson
 E7BD9F26E53A4D0
 2/3/2016

PURCHASING DIRECTOR'S SIGNATURE
 NOT VALID WITHOUT AUTHORIZED SIGNATURE
 CC Approval 1/19/2016



CITY OF DETROIT
 FINANCE DEPARTMENT
 PURCHASING DIVISION
 1008 COLEMAN A. YOUNG
 MUNICIPAL CENTER
 DETROIT, MICHIGAN 48226
 PHONE 313-224-4600
 FAX 313-224-4374

**IF THIS PURCHASE ORDER
 DOES NOT AGREE WITH THE
 BID YOU SUBMITTED,
 PLEASE CONTACT THE
 PURCHASING DIVISION.**

Purchase Order

PURCHASE ORDER NO. 2873346 REVISION 2 PAGE 2

THE ABOVE NUMBER MUST APPEAR ON ALL INVOICES AND SHIPMENTS.

SHIP TO
 18100 Meyers
 Detroit, MI 48235
 United States

BILL TO
 Coleman A Young Municipal Ce
 2 Woodward Avenue
 Ste 642
 Detroit, MI 48226
 United States

SUPPLIER

ALTA EQUIPMENT COMPANY INC
 28775 BECK ROAD
 WIXOM, MI 48393

SUPPLIER NO. 1119665	DATE OF ORDER/BUYER 04-DEC-12 W Hansbrough	REVISED DATE/BUYER 06-JAN-16 H Hughes
PAYMENT TERMS Net 45	SHIP VIA Unspecified	F.O.B. Delivered
FREIGHT TERMS Your Delivery	REQUESTOR/DELIVER TO	CONFIRM TO / TELEPHONE D TANNER (248) 449-6700

LINE	ITEM NUMBER / DESCRIPTION	DELIVERY DATE	QUANTITY	UNIT	UNIT PRICE	EXTENSION	TAX
	purchase order number, part of item number (as referenced in the purchase order)						
	Quantity and Pricing Information: Description of goods or services, part or item number (as referenced in the purchase order), quantity of goods or services provided, unit price of goods or services provided, part or item subtotal (quantity * unit cost), discount terms (if applicable)						
	Delivery Information: Location and date of delivery of goods or services provided, delivery terms (as referenced in the purchase order agreement)						
	INVOICING: All invoices submitted against the contract must include part or item numbers and part or item description, list price, and applicable discount. Items not properly invoiced will not be paid. It is the vendor's responsibility to ensure delivery of invoice(s) to the proper City Dept/Div/Personnel. Invoices must meet the following conditions for payment: a) Price on invoice must correspond to the pricing listed on purchase order and/or contract. b) Contractor must submit price lists in accordance with bid requirements. c) Original invoice must be submitted to the appropriate City of Detroit Account's Payable Section. d) Copy of invoice must be submitted to the department personnel identified on the purchase order as being responsible for processing payment. If a department contact person is not listed on the purchase order the vendor shall request in writing, from the Purchasing Division the name and phone number of the contact person responsible for processing payment.						

CONTRACTS AND PURCHASES BETWEEN THE VENDOR AND THE CITY OF DETROIT ARE SUBJECT TO FEDERAL, STATE AND LOCAL LAWS INCLUDING, BUT NOT LIMITED TO, EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION. THE CITY MAY TERMINATE THE CONTRACT FOR CAUSE OR CONVENIENCE. NO CHANGES EFFECTIVE UNLESS AGREED TO IN WRITING BY CONTRACT AMENDMENT. ONLY SUCH GOODS WILL BE PAID FOR AS COMPLY EXACTLY WITH WRITTEN DESCRIPTION. WHEN SHIPPED VIA COMMON CARRIER, MAIL SHIPPING NOTICE DIRECTLY TO RECEIVING POINT. CASH TERMS DATE FROM RECEIPT AND ACCEPTANCE OF GOODS AND CORRECT INVOICE. PATENTS-CONTRACTORS SHALL PROTECT AND INDEMNIFY AGAINST EXPENSE OF ANY NATURE, SHALL BEAR COST OF ANY SUITS WHICH MAY ARISE, AND SHALL PAY ALL DAMAGES WHICH MAY BE AWARDED AGAINST THE CITY FOR THE USE UNDER THIS SPECIFICATION OF ANY PATENTED DEVICE, PROCESS, APPARATUS, MATERIAL OR INVENTION. THE CITY RESERVES THE RIGHT TO AUDIT EMPLOYEE PAYROLL RECORDS TO VERIFY LABOR CHARGES UPON 72 HOURS NOTICE.

Total 779,388.00

DocuSigned by:
Boysie Jackson
 E7BD9F26E53A4D0 2/3/2016
 PURCHASING DIRECTOR'S SIGNATURE
 NOT VALID WITHOUT AUTHORIZED SIGNATURE



CITY OF DETROIT
 FINANCE DEPARTMENT
 PURCHASING DIVISION
 1008 COLEMAN A. YOUNG
 MUNICIPAL CENTER
 DETROIT, MICHIGAN 48226
 PHONE 313-224-4600
 FAX 313-224-4374

**IF THIS PURCHASE ORDER
 DOES NOT AGREE WITH THE
 BID YOU SUBMITTED,
 PLEASE CONTACT THE
 PURCHASING DIVISION.**

Purchase Order

PURCHASE ORDER NO. 2873346 REVISION 2 PAGE 3

THE ABOVE NUMBER MUST APPEAR ON ALL INVOICES AND SHIPMENTS.

SHIP TO
 18100 Meyers
 Detroit, MI 48235
 United States

BILL TO
 Coleman A Young Municipal Ce
 2 Woodward Avenue
 Ste 642
 Detroit, MI 48226
 United States

SUPPLIER

ALTA EQUIPMENT COMPANY INC
 28775 BECK ROAD
 WIXOM, MI 48393

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LINE	ITEM NUMBER / DESCRIPTION	DELIVERY DATE	QUANTITY	UNIT	UNIT PRICE	EXTENSION	TAX
	<p>Delivery Information: Location and date of delivery of goods or services provided, delivery terms (as referenced in the purchase order agreement)</p> <p>The individual responsible for accepting performance under this Purchase Order Edward porche 313-628-0910. The contact person from whom payment should be requested is the same as above.</p> <p>PRICES ARE FIRM FOR THE LIFE OF THE CONTRACT</p> <p>F.O.B.: PARTS - DELIVERED REPAIR WORK - VENDOR'S LOCATION. (THE CONTRACTOR SHALL PICK-UP AND DELIVER)</p> <p>Purchase Agreement Effective From: 01-JAN-13 To: 31-DEC-16</p>					Amount Agreed: 779,388.00	

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