

TOWNSHIP OF CRANFORD

WWW.CRANFORDNJ.ORG
8 SPRINGFIELD AVE
CRANFORD, NJ 07016

SHIP TO	Fire Department 7 Springfield Avenue Cranford, NJ 07016 T:908-709-7360 F:908-276-6183
	VENDOR #: SURVIV Survivor Fire & Security Survivor Fire & Safety Equip P.O. Box 579 Neptune, NJ 07754 Phone: (908)272-0066 Fax: (908)272-8144

PURCHASE ORDER	
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS. CORRESPONDENCE, ETC.	
NO.	22-01657

ORDER DATE: 09/08/22
REQUISITION NO: R2201608
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD
CHECK NO.
DATE PAID

NOTICE: TAX ID #22-6001739 - TAX EXEMPT

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	Emergent Repairs to Sprinkler	2-01-25-266-145-280	1,035.0000	1,035.00
	Uniform Fire Code			
	<i>Repair #</i> <i>DS-2232221</i>			
			TOTAL	1,035.00

CLAIMANT'S CERTIFICATION & DECLARATION	OFFICER'S CERTIFICATION	APPROVAL TO PURCHASE
I do solemnly declare and certify under penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one. X <i>Cyndie VanBavel</i> VENDOR SIGN HERE Administrative Assistant 9/14/22 OFFICIAL POSITION DATE 47-2839257 TAX ID NO. OR SOCIAL SECURITY NO.	I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures. <i>[Signature]</i> 9/15/22 DEPT. HEAD DATE VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO: TOWNSHIP OF CRANFORD WWW.CRANFORDNJ.ORG 8 SPRINGFIELD AVE CRANFORD, NJ 07016	DO NOT ACCEPT THIS ORDER UNLESS IT IS SIG <i>[Signature]</i> Chief Financial Officer



39A MYRTLE STREET - CRANFORD, NJ 07016
TEL 908-272-0066 ~ WWW.SURVIVORFIRESAFETY.COM ~ FAX 908-272-8144

Invoice: SM 23267

Invoice Date: 9/15/2022

Completion Date: 9/9/2022

PLEASE NOTE OUR NEW ADDRESS. REMIT ALL PAYMENTS TO:
P.O. BOX 579
NEPTUNE, NJ 07754

AR Id: CRAFIR
Bill To: Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

Service Id: CRANFORDFIREDEPT
Service At: Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

Division: Sprinklers - Service/Repair
Description: S-Deficiency Repairs Needed

PO Number: 22-01657
Alt #:

Terms: 15 Days
Due Date: 9/30/2022

WO#	Item	Description	Qty	Unit Price	Amount
<u>32483</u>		Drain Down Dry Sprinkler System, Removed Section of Pipes and Installed New Section of Pipes. Refilled Dry Sprinkler System, Check for leaks, No Leaks Found. System Left in Service and Operating Properly.			
Service					
		3" X 24" Pipe, Galvanized	1.00	0.00	0.00
		3" Coupling	2.00	0.00	0.00
		2" X 3" Mech Tee	1.00	0.00	0.00
		O - As per Deficiency/Quote/Proposal (R)	1.00	1,035.00	1,035.00

Subtotal:	1,035.00
Sales Tax:	0.00
Total Due:	1,035.00

SERVING ALL OF NEW JERSEY

Please return this part with a check or money order made payable to Survivor Fire & Safety.



39A MYRTLE STREET - CRANFORD, NJ 07016
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Account ID	CRAFIR	Amount Due	\$1,035.00
Invoice	23267	Amount Paid	

Credit Card Information

Card Number: _____



Expiration: ____ / ____ CVV: ____
mm yy

E-mail: _____
(If Receipt is Required/Requested)



39A MYRTLE STREET
CRANFORD, NJ 07016

TEL 908-272-0066
FAX 908-272-8144
SURVIVORFIRESAFETY.COM

August 26, 2022

Via: Email

Lt Matt Lubin
CRANFORD FIRE DEPARTMENT
7 Springfield Avenue
Cranford, New Jersey 07016
908-272-2222
m-lubin@cranfordnj.org

CRANFORD FIRE DEPARTMENT
FIRE SUPPRESSION SYSTEM REPAIR AGREEMENT
SFS JOB#DS-2232221

Dear Lt Lubin:

Survivor Fire & Safety Equip. Co., Inc. is pleased to provide you with this price of **\$1,035.00** to provide and install pipe and fittings to repair the sprinkler system leak in the day room at the above listed location. All work will be performed as per code and applicable edition of NFPA. The following items are included in this Agreement and will be considered the scope of work to be performed:

(1) Lot pipe and fittings
One-Year Warranty on Material and Workmanship

The following items are **not included** in the above scope of work:

All Alternates
Sales Tax (Tax Exempt Certificate must be provided)
Water Damage
Access, Security and/or Shutdown Delays

All work is to be performed during normal working hours, unless other arrangements are made. We reserve the right to withdraw this proposal if it is not accepted within sixty days.

If you are issuing a purchase order instead of returning a signed copy of this proposal, please be sure to reference this proposal number on the purchase order.

AGREEMENT ACCEPTANCE

All pages must be returned and signed as necessary with 20% deposit to fully execute this Agreement. Survivor Fire & Safety Equip. Co., Inc. reserves the right to withdraw this Agreement if it is not executed within 60 days.

As an authorized signer/agent of the above referenced Customer, by signing below, I agree to the information and description of services as explained above as well as the General Terms and Conditions that are available on our website at <https://www.survivorfiresafety.com/Site/ServiceTerms>.

Customer Name: _____

Position: _____

Customer Signature: _____

Date: _____

SF&S Signature: _____

Date: _____

Thank you for this opportunity to quote our various services. You are now one step closer to having your systems being maintained by one of the leading fire protection companies in the industry.

Please feel free to return the executed proposal via US mail, e-mail (info@survivorfiresafety.com) or fax to 908-272-8144.

If you have any questions or need any additional information please feel free to contact me at 908-272-0066 and for more information please don't forget to visit us on the web at www.survivorfiresafety.com.

Sincerely,



Scott Van Bavel
Service Manager