TOWNSHIP OF CRANFORD

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

PURCHASE ORDER

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.

NO. 24-00266

ORDER DATE: 01/23/24
REQUISITION NO: R2400265
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX ID #22-6001739 - TAX EXEMPT

SHIP TO

Fire Department
7 Springfield Avenue
Cranford, NJ 07016
T:908-709-7360 F:908-276-6183

VENDOR

VENDOR #: SURVIV

Survivor Fire & Security
Survivor Fire & Safety Equip
39A Myrtle St.
Cranford, NJ 07016

Phone: (908)272-0066 Fax: (908)272-8144

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	Provide and Install Pipe a Replacement Air Regulator and Drip Leg for the Dry Sprinkler System	4-01-26-310-115-221 B&G Firehouse: Maintenance & Repairs	900.0000	900.00
			TOTAL	900.00

CLAIMANT'S CERTIFICATION & DECLARATION

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 Cyndie Van Baire
VENDOR SIGN HERE

Ofice Administrator 2/8/24
OFFICIAL POSITION DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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.

2/8/24
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

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW.

Chief Financial Officer

INVOICE

Pye Barker Fire & Safety
DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD, NJ 07016-3471
9082720066
pyebarkerfire.com

Customer PO:	Order No:	Invoice No:	Due Date:
24-00266	ST00126091	IV00118936	02/21/2024
Invoice Date:	**Terms:**	**Invoice Total:**	**Amount Due:**
02/06/2024	Net 15	900.00	900.00

License: NJDFS#P01672

BILL TO:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

WORKSITE:
69384 - Cranford Fire Department
7 Springfield Avenue
Cranford, NJ 07016

Authorized By:	Job Number:	Service Location:	Bill To ID:	Worksite ID:	Technician:
Matt Lubin	SER0000022098	DBA: Survivor Fire & Safety	69384	69384	Nicholas Roberts

Item	Description	Qty	Unit Price	Total	Tax
DS-24120175	Sprinkler Repair	1	892.50	892.50	0.00
FUEL	Fuel Surcharge	1	7.50	7.50	0.00
	Work Notes: Replace Air Regulator And Add Drip Leg On Air Line				
	Save time and stamps by going paperless. View, print, and pay your invoices online at **https://customer.pyebarkerfire.com/**				

Remit To Address:
Pye-Barker Fire & Safety, LLC
PO BOX 735358
Dallas, TX 75373-5358

PAY NOW:
https://customer.pyebarkerfire.com

Subtotal	900.00
Tax	0.00
Total	900.00

Pye-Barker Fire & Safety DBA: Survivor Fire & Safety
39A MYRTLE ST
CRANFORD NJ 07016-3471
9082720066
1234PZ@pyebarkerfs.com

Report Cover Page

SERVICE DATE: 2/5/2024

SERVICE TICKET: ST00126091

BUILDING	STREET	CITY	STATE	ZIP
Cranford Fire Department	7 Springfield Avenue	Cranford	NJ	07016

BUILDING CONTACT	PHONE
Na	9082760146

Please see the attached reports. If there are any questions, please reach out to the above office.

Download your Report at:

https://customer.pyebarkerfire.com

TR

Customer did not sign
Na
February 05, 2024 2:00:09 AM
ST00126091 -

Signed 2/5/2024

Inspector: Nicholas Roberts

Signed 2/5/2024

Building Contact: Na
Title:

Licenses:
NJDFS#P01672

PYE-BARKER FIRE & SAFETY • EST. 1945

SURVIVOR

Date : 2/5/2024
Frequency :
Service Ticket No. : ST00126091
Inspection Contract No. :
PO No. : 24-00266
Equipment Location : null

DEMAND SERVICE FORM

Property	:	Cranford Fire Department	Owner	:	Cranford Fire Department
Address	:	7 Springfield Avenue	Address	:	7 Springfield Avenue
City	:	Cranford	City	:	Cranford
State	:	NJ	State	:	NJ
Zip	:	07016	Zip	:	07016
Phone	:	9082760146	Phone	:	9082760146

DEMAND SERVICE TICKET

What type of repair is this? Sprinkler

Description of work:

On arrival system normal, installed drip leg on air line and replaced regulator. Set regulator. On departure system normal

At completion of ticket did all repaired or replaced equipment function properly? Yes

SIGNATURE

This report was reviewed with:

Pye-Barker Fire & Safety

Print Name	:	Na	Technician	:	Nicholas Roberts TR
Signature	:	Customer did not sign Na February 05, 2024 08:59 AM ST00126091 -	Signature	:	
Date	:	2/5/2024	Date	:	2/5/2024

SURVIVOR
• FIRE & SAFETY EQUIPMENT CO., INC. •

39A MYRTLE STREET
CRANFORD, NJ 07016

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

January 18, 2024

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-24120175

Dear Lt Lubin:

Survivor Fire & Safety Equip. Co., Inc. is pleased to provide you with this price of **$892.50** to provide and install pipe a replacement air regulator and drip leg for the dry sprinkler system 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) Air Regulator
(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: B/C Matt Lubin Position: Battalion Chief

Customer Signature: Date: 1/23/24

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