

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 39A Myrtle St. Cranford, NJ 07016 Phone: (908)272-0066 Fax: (908)272-8144

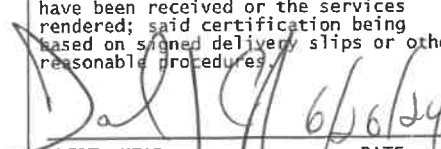
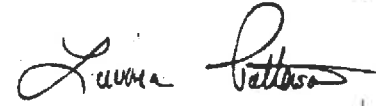
PURCHASE ORDER	
THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, CORRESPONDENCE, ETC.	
NO.	24-01194

ORDER DATE: 06/04/24
REQUISITION NO: R2401121
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	Provide and Install Replacement Valve Tamper Switch One Year Warranty on Material and Workmanship	4-01-25-266-145-280 Uniform Fire Code	487.5000	487.50
			TOTAL	487.50

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 <u>Cyndie Van Bavel</u> VENDOR SIGN HERE Office administrator DATE 6/26/24 OFFICIAL POSITION DATE 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.  DEPT. HEAD DATE 6/26/24 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  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:
24-01194	ST00214145	IV00205905	07/05/2024
Invoice Date:	Terms:	Invoice Total:	Amount Due:
06/20/2024	Net 15	487.50	487.50

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

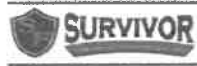
Authorized By:	Job Number:	Service Location:	Bill To ID:	Worksite ID:	Technician:
Matt Lubin	SER0000022098	DBA: Survivor Fire & Safety	69384	69384	Nick Jadusingh

Item	Description	Qty	Unit Price	Total	Tax
DS-24188109	Sprinkler Repair	1	487.50	487.50	0.00
	Work Notes: Replace Valve Tamper Switch  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



Subtotal	487.50
Tax	0.00
Total	487.50



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

Report Cover Page

SERVICE DATE: 6/19/2024

SERVICE TICKET: ST00214145

BUILDING	STREET	CITY	STATE	ZIP
Cranford Fire Department	7 Springfield Avenue	Cranford	NJ	07016
BUILDING CONTACT	PHONE			
John dillon	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>

John Dillon
June 19, 2024 03:55 PM
ST00214145

Signed 6/19/2024

Inspector: Nick Jadusingh

Signed 6/19/2024

Building Contact: John dillon
Title:

Licenses:
NJDFS#P01672



Date : 6/19/2024
Frequency :
Service Ticket No. : ST00214145
Inspection Contract No. :
PO No. : 24-01194
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

DEFICIENCIES

None found at time of inspection.

DEMAND SERVICE TICKET

What type of repair is this? Fire Sprinkler

Manufacturer? Potter

Model? OSYSU-2

Description of work:

Replaced (2) broken osy2 tamper switches with (2) new Potter OSYSU-2 tamper switches, after installation found another OSY2 tamper switch not working. The system was returned back to 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 : John dillon

Technician : Nick Jadusingh

Signature : 
John Dillon
June 18, 2024 03:48 PM
ST00214145

Signature : 

Date : 6/19/2024

Date : 6/19/2024



39A MYRTLE STREET
CRANFORD, NJ 07016

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

May 14, 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-24188109

Dear Lt Lubin:

Survivor Fire & Safety Equip. Co., Inc. is pleased to provide you with this price of **\$487.50** to provide and install a replacement valve tamper switch 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) OS&Y valve tamper switch
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: [Signature]

Date: 6/5/24

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