

TOWNSHIP OF CRANFORD

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

SHIP TO	Cranford Public Library 224 Walnut Avenue Cranford, NJ 07016 T:908-709-7272 F:908-709-1658
	VENDOR #
VENDOR	Survivor Fire & Security Systems, Inc. P.O. Box 782 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.	21-01098-02

ORDER DATE: 06/09/21
REQUISITION NO:
DELIVERY DATE: 10/05/21
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	Library annual inspections Invoice # SM 20355/Annual Backflow Inspection	1-01-29-390-100-214 Library: Outside Professional Expense	550.0000	550.00
			TOTAL	550.00

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 <u>Signature on file</u> VENDOR SIGN HERE 10/5/21 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. <u>Andrew Klimosky</u> 10-5-21 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 SIGNED BELOW. _____ Chief Financial Officer



SURVIVOR

FIRE & SAFETY EQUIPMENT CO., INC.

39A MYRTLE STREET - PO BOX 782 - CRANFORD, NJ 07016
TEL 908-272-0066 - WWW.SURVIVORFIRESAFETY.COM - FAX 908-272-8144

Invoice: SM 20355

Invoice Date: 9/30/2021

Completion Date: 9/23/2021

AR Id: CRATOW
Bill To: Township of Cranford
Town Hall
8 Springfield Avenue
Cranford, NJ 07016

Service Id: CRANFORDLIBRARY
Service At: Cranford Public Library
244 Walnut Avenue
Cranford, NJ 07016

Division: Sprinklers - Service/Repair
Description: S-Back Flow Inspection Needed

PO Number:
Alt #:

Terms: 15 Days
Due Date: 10/15/2021

WO#	Item	Description	Qty	Unit Price	Amount
28465		Backflow Inspection Completed as per NFPA 25 and the State of New Jersey Uniform Fire Code.			
	Service				
		S - Backflow Inspections (Fire Line)	1.00	275.00	275.00
		S - Backflow Inspections (Domestic Line)	1.00	275.00	275.00

Subtotal:	550.00
Sales Tax:	0.00
Total Due:	550.00

SERVING ALL OF NEW JERSEY

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



SURVIVOR

FIRE & SAFETY EQUIPMENT CO., INC.

39A MYRTLE STREET - PO BOX 782 - CRANFORD, NJ 07016
TEL 908-272-0066 - WWW.SURVIVORFIRESAFETY.COM - FAX 908-272-8144

Account ID	CRATOW	Amount Due	\$550.00
Invoice	20355	Amount Paid	

Credit Card Information

Card Number: _____



Expiration: ____ / ____ CVV: ____
mm yy

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