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. 22-00963-01

ORDER DATE: 05/13/22
REQUISITION NO:
DELIVERY DATE: 08/25/22
STATE CONTRACT:
F.O.B. TERMS:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX ID #22-6001739 - TAX EXEMPT

SHIP TO

Cranford Public Library
224 WalnutAvenue
Cranford, NJ 07016
T:908-709-7272 F:908-709-1658

VENDOR

VENDOR #: SURVIV
Survivor Fire & Security
Survivor Fire & Safety Equip
P.O. Box 579
Neptune, NJ 07754

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

QTY/UNIT	DESCRIPTION	ACCOUNT NO.	UNIT PRICE	TOTAL COST
1.00	Library annual inspections Invoice # SM 23083/Fire alarm inspections/sensitivity testing	2-01-29-390-100-214 Library: Outside Professional Expense	2,338.5000	2,338.50
			TOTAL	2,338.50

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 Signature on file 8/25/22
VENDOR SIGN HERE

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.

DEPT. HEAD 8-25-22 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

SURVIVOR
FIRE & SAFETY EQUIPMENT CO., INC.

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

Invoice: SM 23083

Invoice Date: 8/23/2022

Completion Date: 8/18/2022

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

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: Multiple Divisions
Description: A-Inspection Needed

PO Number:
Alt #:

Terms: 15 Days
Due Date: 9/7/2022

WO#	Item	Description	Qty	Unit Price	Amount
32032		Fire Alarm Inspection Completed as per NFPA 72 and the State of New Jersey Uniform Fire Code.			
	Service				
		A - Fire Alarm Inspection (51-100 Devices)	1.00	378.00	378.00
		O - Energy Conservation Fee	1.00	7.50	7.50
32033		Sprinkler Inspection Completed as per NFPA 25 and the State of New Jersey Uniform Fire Code.			
	Service				
		A - Fire Alarm Inspection (13-50 Devices)	1.00	378.00	378.00
32171		Fire Alarm Inspection Completed as per NFPA 72 and the State of New Jersey Uniform Fire Code.			
	Service				
		A - Fire Alarm Sensitivity Testing	1.00	1,575.00	1,575.00

Subtotal:	2,338.50
Sales Tax:	0.00
Total Due:	**2,338.50**

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

Account ID	CRATOW	Amount Due	$2,338.50
Invoice	23083	Amount Paid	

Credit Card Information

Card Number: _____ ☐ ☐ ☐ ☐

Expiration: ____ / ____ (mm / yy) CVV: ____

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