

VENDOR NO.
1220



PURCHASE ORDER
LONG BEACH ISLAND
BOARD OF EDUCATION
LONG BEACH ISLAND GRADE SCHOOL
201 20TH STREET
SHIP BOTTOM, NEW JERSEY 08008
TEL (609) 494-8851 x2014 FAX (609) 494-2921

BUDGET YEAR

2022->2023

PURCHASE ORDER NUMBER

230578

THIS NUMBER MUST APPEAR ON
ALL PACKAGES, INVOICES AND
CORRESPONDENCE.

DATE:
05/02/2023

VOUCHER
PLEASE SIGN & RETURN
TO THE ABOVE ADDRESS

VENDOR:

SHIP TO:

FYR-FYTER SALES & SERVICE
P.O. BOX 5098
TRENTON,, NJ 08638

LBI Board of Education
201 20th Street
Ship Bottom, NJ 08008

REQUISITION NUMBER		NAME		
QUANTITY ORDERED	CATALOG / UNIT	ITEM DESCRIPTION / ACCOUNT NUMBER	UNIT PRICE	TOTAL AMOUNT
1	Each	EJ Fire Suppression System	196.38	196.38
1	Each	EJ Annual Fire Extinguishers Inspection	533.64	533.64
1	Each	Bus Garage Annual Fire Extinguishers Inspections	163.34	163.34
1	Each	LBI Annual Fire Extinguishers Inspection	305.09	305.09
7747/11-000-262-340-0000- - (\$1,198.45)				\$1,198.45

CLAIMANT'S CERTIFICATION AND DECLARATION

I do solemnly declare and certify under the 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

DATE

TITLE

S.S. # or TAX I.D. #

OFFICER'S OR EMPLOYEE'S CERTIFICATION

Having knowledge of the facts and in the course of regular procedures, I certify that the materials and supplies have been received or the services rendered; said certification is based on delivery slips acknowledged by a municipal employee or other reasonable procedures.

SIGNATURE

TITLE OR POSITION

PAYMENT AUTHORIZED

The above claim was ordered paid at a meeting of the Long Beach Island Board of Education held

20

CLERK

**THIS ORDER IS INVALID
UNLESS SIGNED BY THE
BUSINESS ADMINISTRATOR**

BY

BUSINESS ADMINISTRATOR'S SIGNATURE

Page 1

**VENDOR ACCEPTANCE CERTIFIES COMPLIANCE WITH FEDERAL AND STATE REGULATIONS REGARDING EQUAL
EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, CREED, COLOR, NATIONAL ORIGIN, AGE OR SEX.**

VOUCHER COPY - SIGN AT X AND RETURN WITH INVOICE

NJDFS #P-00248

Invoice

Fyr-Fyter Sales & Service, Inc.

262 PENNINGTON LAWRENCEVILLE RD

Date	Invoice #
4/28/2023	126619

Phone # 6098960600

Fax # 609-737-1936

Bill To

Ship To

Long Beach Island Bd. of Education
200 Barnegat Avenue
Surf City, NJ 08008

Ethel Jacobson School
200 Barnegat Ave.
Surf City, NJ

S.O. No.	Ship Date	Due Date	P.O. No.	Terms	Project
	3/21/2023	5/8/2023		NET 10	

Quantity	Description	Rate	Amount
1	Service Pyro Chem PCL300 Fire Suppression System	45.10	45.10
3	Globe Model ML Fusible Link UL 360°F	9.10	27.30
1	16 gram CO2 Actuator Cartridge	20.83	20.83
1	Control Head Replacement O-ring	3.65	3.65
1	Technical Time, Fire Systems, Normal Hours	99.50	99.50
	ST # 28820051		

All invoices are payable upon presentation, at the time of work, unless prior payment arrangements have been made with Fyr-Fyter. Customer agrees that all unpaid balances will incur a minimum carrying fee of \$20.00 per month. Customer signature indicates that goods and/or services provided herein are to their satisfaction. Customer agrees to Fyr Fyter's "General Terms and Conditions of Sale"

Total \$196.38

Payments/Credits \$0.00

Balance Due \$196.38

NJDFS #P-00248

Invoice**Fyr-Fyter Sales & Service, Inc.****262 PENNINGTON LAWRENCEVILLE RD**

Date	Invoice #
4/28/2023	126620

Phone # 6098960600**Fax # 609-737-1936**

Bill To

Ship To

Long Beach Island Bd. of Education
200 Barnegat Avenue
Surf City, NJ 08008

Ethel Jacobson School
200 Barnegat Ave.
Surf City, NJ

S.O. No.	Ship Date	Due Date	P.O. No.	Terms	Project
	3/21/2023	5/8/2023		NET 10	

Quantity	Description	Rate	Amount
18	Portable Fire Extinguisher, Annual Inspection	4.15	74.70
18	Fire Extinguisher, Bulls Eye Tamper Seal	0.49	8.82
1.5	Technical Time Extinguisher, Service, Repair & Delivery	79.50	119.25
2	Recharge 2.5 Gallon Pres. Water Extinguisher	16.86	33.72
1	Recharge 6 Liter Wet Chem Extinguisher	133.47	133.47
3	Low Pressure Hydrostatic Test, Water Type Extinguisher	10.33	30.99
1	Recharge 5# ABC Extinguisher	31.15	31.15
1	Recharge 10# ABC Extinguisher	46.39	46.39
1	Low Pressure Hydrostatic Test, Small DC, 5# & under, Stored Pressure	5.60	5.60
1	Check Stem Amerex	6.95	6.95
3	Check Stem Amerex	10.90	32.70
1	Ansul Sentry Valve Stem (DC & Halotron)	9.90	9.90
	ST # 28820051		

All invoices are payable upon presentation, at the time of work, unless prior payment arrangements have been made with Fyr-Fyter. Customer agrees that all unpaid balances will incur a minimum carrying fee of \$20.00 per month. Customer signature indicates that goods and/or services provided herein are to their satisfaction. Customer agrees to Fyr Fyter's "General Terms and Conditions of Sale"

Total	\$533.64
Payments/Credits	\$0.00
Balance Due	\$533.64

NJDFS #P-00248

Invoice**Fyr-Fyter Sales & Service, Inc.****262 PENNINGTON LAWRENCEVILLE RD**

Date	Invoice #
4/28/2023	126621

Phone # 6098960600**Fax # 609-737-1936**

Bill To

Ship To

Long Beach Island Bd. of Education
200 Barnegat Avenue
Surf City, NJ 08008

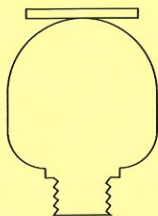
Bus Garage
19th St. & East Bay Ave.
Ship Bottom, NJ 08008
Frank 494-6918

S.O. No.	Ship Date	Due Date	P.O. No.	Terms	Project
	3/21/2023	5/8/2023		NET 10	

Quantity	Description	Rate	Amount
9	Portable Fire Extinguisher, Annual Inspection	4.15	37.35
9	Fire Extinguisher, Bulls Eye Tamper Seal	0.49	4.41
1	Technical Time Extinguisher, Service, Repair & Delivery	79.50	79.50
1	Recharge 5# ABC Extinguisher	31.15	31.15
1	Six Year Required Maintenance, Fire Extinguisher	3.98	3.98
1	Check Stem Amerex	6.95	6.95
ST: # 28819449			

All invoices are payable upon presentation, at the time of work, unless prior payment arrangements have been made with Fyr-Fyter. Customer agrees that all unpaid balances will incur a minimum carrying fee of \$20.00 per month. Customer signature indicates that goods and/or services provided herein are to their satisfaction. Customer agrees to Fyr Fyter's "General Terms and Conditions of Sale"

Total	\$163.34
Payments/Credits	\$0.00
Balance Due	\$163.34



ST# 28814149
Fyr-Fyter Sales and Service, Inc.

262 Pennington-Lawrenceville Road

Pennington, New Jersey 08534

Phone (609) 896-0600 Fax (609) 737-1936 E-mail: jason@fyrfyter.net

N.J.D.F.S. #P-00248

Field Estimate / Time and Materials Agreement / Emergency Service Repair

Buyer Information:

Name _____
Address _____
City/State _____
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Project Information (Work site):

Name LBI BOE Bus Garage
Address 19th + East Bay Ave
City/State Ship Bottom, NJ 08608
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Scope of Work: Enter a brief description of the work (to be) performed and materials needed / installed:

A/S 9 Ext 1 5# AIRC to chop for service
9 Seals
1 Spare left on site

This work is proposed / completed: (circle one) Completed Payment method: cash / check / credit card (circle one)

Costs:

Technician #hrs. _____ @ \$ _____ per hour	Total Labor charge \$ _____
Helper #hrs. _____ @ \$ _____ per hour	Total Travel charge \$ _____
Travel charge #hrs. _____ @ \$ _____ per hour	Total Parts charge \$ _____
Parts list price less a discount of _____ %	Total charge \$ _____

After normal hours on weekdays, multiply the hourly rates by 1.5

For Saturdays, multiply the hourly rates by 1.5

For Sundays and Holidays, multiply the hourly rates by 2.0

Sales tax to be added unless a tax exempt certificate is on file. Normal hours Mon-Fri. 8:00 am – 4:30 pm

There is a four hour minimum charge for emergency service and emergency repairs.

Technician name: Tim Date: 3/21/23
Time in: 12:45 Time out: 1:00

The undersigned agrees to pay for the parts, hourly labor rates and travel charges for the work described.

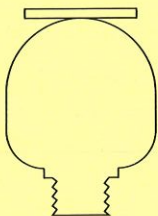
ACCEPTED BY: Meghan Lee COMPANY: LBI School District
(Print name): Meghan Lee DATE: 3/21/23
(Print title): Business Admin

For information call: (609) 896-0600 or (800) 792-8319

Return original to: 262 Pennington-Lawrenceville Road, Pennington, NJ 08534

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Subject to General Terms and Conditions of Sale on back

Yellow copy: Customer
FORM 4-1 (Rev. 3/20/2013)



ST#28819449
Fyr-Fyter Sales and Service, Inc.

262 Pennington-Lawrenceville Road

Pennington, New Jersey 08534

Phone (609) 896-0600 Fax (609) 737-1936 E-mail: jason@fyrfyter.net

N.J.D.F.S. #P-00248

Field Estimate / Time and Materials Agreement / Emergency Service Repair

Buyer Information:

Name _____
Address _____
City/State _____
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Project Information (Work site):

Name LBI BOE Bus Garage
Address 191st East Bay Ave
City/State Ship Bottom, NJ 08008
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Scope of Work: Enter a brief description of the work (to be) performed and materials needed / installed:

Delivery of 1 5th ABC Ext from service.

Picked up 1 FF Spare

This work is proposed / completed. (circle one) Payment method: cash / check / credit card (circle one)

Costs:

Technician #hrs. _____ @ \$ _____ per hour	Total Labor charge \$ _____
Helper #hrs. _____ @ \$ _____ per hour	Total Travel charge \$ _____
Travel charge #hrs. _____ @ \$ _____ per hour	Total Parts charge \$ _____
Parts list price less a discount of _____ %	Total charge \$ _____

After normal hours on weekdays, multiply the hourly rates by 1.5

For Saturdays, multiply the hourly rates by 1.5

For Sundays and Holidays, multiply the hourly rates by 2.0

Sales tax to be added unless a tax exempt certificate is on file. Normal hours Mon-Fri. 8:00 am – 4:30 pm

There is a four hour minimum charge for emergency service and emergency repairs.

Technician name: Tim
Time in: 11:40

Date: 4/4/23
Time out: 11:45

The undersigned agrees to pay for the parts, hourly labor rates and travel charges for the work described.

ACCEPTED BY: [Signature]
(Print name): Daniel S. [unclear]
(Print title): Assistant to BA

COMPANY: LBI BOE
DATE: 4/4/2023

For information call: (609) 896-0600 or (800) 792-8319

Return original to: 262 Pennington-Lawrenceville Road, Pennington, NJ 08534

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FORM 4-1 (Rev. 3/20/2013)

NJDFS #P-00248

Fyr-Fyter Sales & Service, Inc.**262 PENNINGTON LAWRENCEVILLE RD****Invoice**

Date	Invoice #
4/28/2023	126623

Phone # 6098960600**Fax # 609-737-1936**

Bill To

Ship To

Long Beach Island Bd. of Education
200 Barnegat Avenue
Surf City, NJ 08008

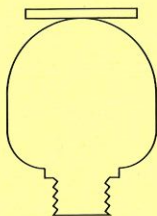
Long Beach Island Grade School
20th St. & Central Ave.
Ship Bottom, NJ 08008

S.O. No.	Ship Date	Due Date	P.O. No.	Terms	Project
	3/21/2023	5/8/2023		NET 10	

Quantity	Description	Rate	Amount
21	Portable Fire Extinguisher, Annual Inspection	4.15	87.15
21	Fire Extinguisher, Bulls Eye Tamper Seal	0.49	10.29
1	Technical Time Extinguisher, Service, Repair & Delivery	79.50	79.50
3	Recharge 5# ABC Extinguisher	31.15	93.45
3	Six Year Required Maintenance, Fire Extinguisher	3.98	11.94
2	Check Stem Badger	9.08	18.16
1	Kidde Valve Stem	4.60	4.60
	ST: # 28819229		

All invoices are payable upon presentation, at the time of work, unless prior payment arrangements have been made with Fyr-Fyter. Customer agrees that all unpaid balances will incur a minimum carrying fee of \$20.00 per month. Customer signature indicates that goods and/or services provided herein are to their satisfaction. Customer agrees to Fyr Fyter's "General Terms and Conditions of Sale"

Total	\$305.09
Payments/Credits	\$0.00
Balance Due	\$305.09



ST# 2884229
Fyr-Fyter Sales and Service, Inc.

262 Pennington-Lawrenceville Road

Pennington, New Jersey 08534

Phone (609) 896-0600 Fax (609) 737-1936 E-mail: jason@fyrfyter.net

N.J.D.F.S. #P-00248

Field Estimate / Time and Materials Agreement / Emergency Service Repair

Buyer Information:

Name BR#958064
Address _____
City/State _____
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Project Information (Work site):

Name Long Beach Island Grade School
Address 20th St + Central Ave
City/State Ship Bottom, NJ 08008
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Scope of Work: Enter a brief description of the work (to be) performed and materials needed / installed:

SA Inspection & Repair PCL 300 Pie - engineered w/ supp. system.
Replaced: 2 - 360 MFL
1 - O-Ring
1 - 16gram Actuation Cartridge
A/S 21 Ext
21 Sols
3-5" ABC To FF for
3-10" ABC service.

This work is proposed / completed. (circle one) Payment method: cash / check / credit card (circle one)

Left 3 spares on site.
Costs: 4-Class in kitchen is missing.

Technician #hrs. _____ @ \$ _____ per hour	Total Labor charge \$ _____
Helper #hrs. _____ @ \$ _____ per hour	Total Travel charge \$ _____
Travel charge #hrs. _____ @ \$ _____ per hour	Total Parts charge \$ _____
Parts list price less a discount of _____ %	Total charge \$ _____

After normal hours on weekdays, multiply the hourly rates by 1.5

For Saturdays, multiply the hourly rates by 1.5

For Sundays and Holidays, multiply the hourly rates by 2.0

Sales tax to be added unless a tax exempt certificate is on file. Normal hours Mon-Fri. 8:00 am - 4:30 pm

There is a four hour minimum charge for emergency service and emergency repairs.

Technician name: Tim Date: 3/21/23
Time in: 10:00 Time out: 12:15

The undersigned agrees to pay for the parts, hourly labor rates and travel charges for the work described.

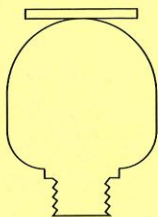
ACCEPTED BY: [Signature] COMPANY: LBT School District
(Print name): Meghan Lee DATE: 3/21/23
(Print title): Business Administrator

For information call: (609) 896-0600 or (800) 792-8319

Return original to: 262 Pennington-Lawrenceville Road, Pennington, NJ 08534

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FORM 4-1 (Rev. 3/20/2013)



ST# 28819229
Fyr-Fyter Sales and Service, Inc.

262 Pennington-Lawrenceville Road
Pennington, New Jersey 08534

Phone (609) 896-0600 Fax (609) 737-1936 E-mail: jason@fyrfyter.net
N.J.D.F.S. #P-00248

Field Estimate / Time and Materials Agreement / Emergency Service Repair

Buyer Information:

Name _____
Address _____
City/State _____
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Project Information (Work site):

Name Long Beach Island Grade School
Address 20th + Central Ave
City/State Ship Bottom, NJ 08088
Attn.: _____
E-mail: _____
Phone: _____
Fax: _____

Scope of Work: Enter a brief description of the work (to be) performed and materials needed / installed:

Delivery of 3 5# ABC Ext from service

Picked up 1 FF Spare.

This work is proposed / completed. (circle one) Payment method: cash / check / credit card (circle one)

Costs:

Technician #hrs. _____ @ \$ _____ per hour	Total Labor charge \$ _____
Helper #hrs. _____ @ \$ _____ per hour	Total Travel charge \$ _____
Travel charge #hrs. _____ @ \$ _____ per hour	Total Parts charge \$ _____
Parts list price less a discount of _____ %	Total charge \$ _____

After normal hours on weekdays, multiply the hourly rates by 1.5

For Saturdays, multiply the hourly rates by 1.5

For Sundays and Holidays, multiply the hourly rates by 2.0

Sales tax to be added unless a tax exempt certificate is on file. Normal hours Mon-Fri. 8:00 am – 4:30 pm

There is a four hour minimum charge for emergency service and emergency repairs.

Technician name: Tim
Time in: 11:10

Date: 4/4/23
Time out: 11:40

The undersigned agrees to pay for the parts, hourly labor rates and travel charges for the work described.

ACCEPTED BY: [Signature]
(Print name): Donna Smith
(Print title): Assistant Business Admin

COMPANY: LBIS BCL
DATE: 4/4/2023

For information call: (609) 896-0600 or (800) 792-8319

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