

## EMERGENCY EQUIPMENT RENTAL AGREEMENT

<b>1. PROCUREMENT AGENCY a. name and address:</b>  Department of Natural Resources & Conservation Attn: Contracting Officer 2705 Spurgin Road Missoula MT 59804  b. Phone Number: 406-542-4300      c. FAX Number: 406-542-4242		<b>2. AGREEMENT NUMBER (Must appear on all documents relating to this agreement):</b> <b>Type 2 Crew/Module Agreement</b>  <div style="text-align: center; border: 1px solid black; padding: 2px;"><b>DNRC-MT-FPB-19-005</b></div> <b>3. EFFECTIVE DATES OF AGREEMENT:</b> a. beginning <u>June 1, 2019</u> b. ending <u>May 31, 2020</u> c. Specific incident only: Incident Name: _____ Incident Number: _____			
<b>4. CONTRACTOR a. name and address:</b>  Grayback Forestry Inc. 1150 Ort Lane Merlin OR 97532  b. EIN/SSN: [REDACTED]      c. DUNS: 095013975 d. SAM      YES      No e. EMAIL Address: <a href="mailto:mike@graybackforestry.com">mike@graybackforestry.com</a> <a href="mailto:wavde@graybackforestry.com">wavde@graybackforestry.com</a> f. Telephone Number (day): (541) 476-0033  Telephone Number (night): same Cell Phone Number: (541) 218-2748 FAX (541) 476-0162		<b>5. POINT OF HIRE (Location when hired if different than Block 4):</b>  <div style="text-align: center; border: 1px solid black; padding: 5px;"><b>Location at time of dispatch</b></div>		<b>6. ORDERING DISPATCH CENTER</b>  <div style="text-align: center; border: 1px solid black; padding: 5px;"><b>MDC</b></div>	
<b>10. BUSINESS SIZE OF CONTRACTOR:</b> a. <input checked="" type="checkbox"/> small    b. <input type="checkbox"/> Other    c. <input type="checkbox"/> Women-Owned    d. <input type="checkbox"/> Small Disadvantaged e. <input type="checkbox"/> HUB Zone    f. <input type="checkbox"/> Service Disadvantaged Vet (Information for tracking purposes only – not used for preferential hiring)		<b>7. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY:</b>  <input checked="" type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry)			
<b>11. ITEM DESCRIPTION: positions for Type 2 Crew/Module</b>		<b>12. NO. OF OPERATORS PER SHIFT</b>	<b>13. HR/LY/DAILY/MILEAGE/SHIFT BASIS (ss/ds; ref. Cl.6)</b> Rate      Unit	<b>14. SPECIAL</b>	<b>15. GUARANTEE (10 HOURS)</b>
TYPE 2 CREW		18 to 20	38.50      Hourly		
MODULE		8 to 10	38.50      Hourly		
<b>16. SPECIAL PROVISIONS</b>  A. All terms, conditions, specifications, and attachments contained in the <b>TYPE 2 CREW/MODULE AGREEMENT</b> are attached hereto and incorporated herein by reference.					
<b>17. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE</b>  		<b>18. DATE</b>  28-May-19	<b>19. PRINT NAME AND TITLE</b>  <b>Milt Coyle, General Manager</b>  b. Phone Number: 541-476-0033    c. FAX: 541-476-0162		
<b>23. DNRC PROCUREMENT OFFICER'S SIGNATURE</b>  		<b>24. DATE</b>  6.8.19	<b>25. a. PRINT NAME AND TITLE</b>  <b>Wanemah Hulett – Fire Business Program Manager</b>  b. Phone Number: 406-542-4230    c. FAX: 406-542-4242		