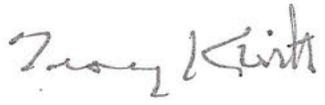


EMERGENCY EQUIPMENT RENTAL AGREEMENT

1. PROCUREMENT AGENCY a. name and address: Department of Natural Resources & Conservation Attn: Contracting Officer 2705 Spurgin Road Missoula MT 59804		2. AGREEMENT NUMBER (Must appear on all documents relating to this agreement): Type 2 Fireline Agreement																											
b. Phone Number: 406-542-4300 c. FAX Number: 406-542-4242		DNRC-MT-FPB-20-003																											
4. CONTRACTOR a. name and address: Rocky Mountain Fire Company 4020 Snowdrift Lane Missoula MT 59808		3. EFFECTIVE DATES OF AGREEMENT: a. beginning <u>June 1, 2020</u> b. ending <u>May 31, 2021</u> c. Specific incident only: Incident Name:																											
b. EIN/SSN [REDACTED] c. DUNS: 130783090 d. SAM YES No e. EMAIL Address: f. Telephone Number (day): 406-239-2484 or 728-5858 Telephone Number (night): 406-239-2484 or 728-5858 Cell Phone Number: FAX: 406-728-6633		5. POINT OF HIRE (Location when hired if different than Block 4): <p style="text-align: center;">Location at time of dispatch</p>																											
10. BUSINESS SIZE OF CONTRACTOR: a. <input 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)		6. ORDERING DISPATCH CENTER <p style="text-align: center;">GDC</p>																											
11. ITEM DESCRIPTION: positions for Type 2 Crew/Module		7. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY: <input checked="" type="checkbox"/> CONTRACTOR (wet) <input type="checkbox"/> GOVERNMENT (dry)																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 40%;">ITEM DESCRIPTION: positions for Type 2 Crew/Module</th> <th rowspan="2" style="width: 10%;">12. NO. OF OPERATORS PER SHIFT</th> <th colspan="2" style="width: 20%;">13. HR/DAI/MI/SHIF BASIS (ss/ds; ref. Cl.6)</th> <th rowspan="2" style="width: 15%;">14. SPECIAL</th> <th rowspan="2" style="width: 15%;">15. GUARANTEE (10 HOURS)</th> </tr> <tr> <th style="width: 10%;">Rate</th> <th style="width: 10%;">Unit</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">TYPE 2 CREW</td> <td style="text-align: center;">18 to 20</td> <td style="text-align: center;">39.50</td> <td style="text-align: center;">Hourly</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">MODULE</td> <td style="text-align: center;">8 to 10</td> <td style="text-align: center;">39.50</td> <td style="text-align: center;">Hourly</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">TYPE 2 CREW IA</td> <td style="text-align: center;">18 to 20</td> <td style="text-align: center;">39.50</td> <td style="text-align: center;">Hourly</td> <td></td> <td></td> </tr> </tbody> </table>		ITEM DESCRIPTION: positions for Type 2 Crew/Module	12. NO. OF OPERATORS PER SHIFT	13. HR/DAI/MI/SHIF BASIS (ss/ds; ref. Cl.6)		14. SPECIAL	15. GUARANTEE (10 HOURS)	Rate	Unit	TYPE 2 CREW	18 to 20	39.50	Hourly			MODULE	8 to 10	39.50	Hourly			TYPE 2 CREW IA	18 to 20	39.50	Hourly			8. OPERATOR FURNISHED BY: <input checked="" type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT	
ITEM DESCRIPTION: positions for Type 2 Crew/Module	12. NO. OF OPERATORS PER SHIFT			13. HR/DAI/MI/SHIF BASIS (ss/ds; ref. Cl.6)				14. SPECIAL	15. GUARANTEE (10 HOURS)																				
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TYPE 2 CREW IA	18 to 20	39.50	Hourly																										
16. SPECIAL PROVISIONS A. All terms, conditions, specifications, and attachments contained in the TYPE 2 FIRELINE AGREEMENT are attached hereto and incorporated herein by reference.		9. Contractor Authorized Commissary: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																											
17. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE 		18. DATE 5.28.2020																											
23. DNRC PROCUREMENT OFFICER'S CO-SIGNATURE 		19. PRINT NAME AND TITLE TROY KURTH 406-239-2484 b. Phone Number: c. FAX:																											
24. DATE 6.2.20		25. a. PRINT NAME AND TITLE Wanemah Hulett – Incident Business Specialist b. Phone Number: 406-542-4230 c. FAX:																											