

## City of San Diego PURCHASE ORDER

PO No. 4500084581

Date: 10/04/2016 Page 1 of 2

Ship To:

P & R COMMUNITY PARKS II DIV SEE NOTES SEE NOTES SAN DIEGO CA 92101-4806 BIII TO: P & R COMMUNITY PARKS II DIV ADMIN

MS804 202 C ST

SAN DIEGO CA 92101-4806

Billing Contact: JUANITA MOILANEN

Telephone:

E-Mail: jmoilanen@sandiego.gov

**FOR TOTAL** 

Vendor:

Property Building Maintenance Ser 1725 South Escondido Boulevard

Suite A

Escondido CA 92025

Terms:

within 30 days Due net **Delivery Terms:** 

**FOB Destination** 

Buyer: Lisa Hoffmann Telephone: 619-236-6096

E-Mail: LHoffmann@sandiego.gov

Vendor ID: 10033819 Telephone:619-401-0949 E-Mail: framos.pbms@gmail.com

Del.Date Quantity/UM **Unit Price Extended Price** Line# Item ID/Description JANITORIAL SERVICE 06/30/2017 50,000 EA USD 1.00 USD 50,000.00 EXPENDITURE ON THIS PO CANNOT EXCEED \$50,000 PROVIDE JANITORIAL SERVICE AT THE FOLLOWING SITES FOR COMFORT STATIONS: MONDAY THROUGH SUNDAY INCLUDING CITY OBSERVED HOLIDAYS 2 TIME EACH DAY AT 6:00 A.M. - 11:00 A.M. AND 1:00 P.M. - 4:00 P.M. • CHICANO NEIGHBORHOOD PARK (619) 235-1127 • GOMPERS NEIGHBORHOOD PARK (619) 527-3416 • KENNEDY NEIGHBORHOOD PARK (619) 527-3416 • MARIE WIDMAN NEIGHBORHOOD PARK (619) 527-3416 • WARD CANYON NEIGHBORHOOD PARK (619) 235-1161 SATURDAY AND SUNDAY (ONLY) AND ALL CITY OBSERVED HOLIDAYS 2 TIME EACH DAY AT 6:00 A.M. - 11:00 A.M. AND 1:00 P.M. - 4:00 P.M. • CHEROKEE POINT (619) 641-6104 • HOLLYWOOD NEIGHBORHOOD PARK (619) 641-6104 • KEILLER NEIGHBORHOOD PARK (619) 527-3464 • NORTH PARK (619) 235-1161 • TERALTA PARK (619) 641-6104 PERIOD COVERED: JULY 1, 2016 THROUGH JUNE 30, 2017 ALL EXTRA LABOR/MATERIALS DEEMED NECESSARY WITH PRIOR APPROVAL OF AUTHORIZED PERSONNEL OF COMMUNITY PARKS II DIVISION. INSURANCE TO BE UPDATED AS REQUIRED. PAY PER INVOICE PLEASE EMAIL THE INVOICES TO JMOILANEN@SANDIEGO.GOV OR MAIL TO: COMMUNITY PARKS II 202 C STREET, MS 804C SAN DIEGO, CA 92101 **DEPARTMENT CONTACTS:** MARIA FLOR POPOCA (619) 235-5205 ADRIAN ZOLLA (619) 525-8241 FOR INVOICE INFORMATION: JUANITA MOILANEN, ACCOUNTS PAYABLE PHONE: (619) 525-8239 EMAIL: JMOILANEN@SANDIEGO.GOV Item partially delivered Notes: By performing the services detailed in this purchase order, Contractor is entering into a contract with the City. Contractor certifies that he Notes: The Terms and Conditions of this Purchase Order are available at http://sandiego.gov/purchasing/ SEE LAST PAGE

**IMPORTANT!** 

To ensure prompt payments, PO # must appear on all shipments and invoices; all invoices must be directed to *Billing* Contact person at *Bill-To* address listed above



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Line#	Item ID/Description D	el.Date	Quantity/UM	Unit Price	Extended Price
Line#	or she is aware of the wage provisions described herein and shall comply with such provisions before commencing services.  Living Wages. This Contract is subject to the City's Living Wage Ordinance (LWO), codified at SDMC sections 22.4201 through 22.4245. LWO requires payment of minimum hourly wage rates and other benefits unless an exemption applies. SDMC section 22.4225 requires each Contractor to fill out and file a living wage certification with the City Manager within thirty (30) days of Award of the Contract. LWO wage and health benefit rates are adjusted annually in accordance with SDMC section 22.422(b) to reflect the Consumer Price Index. Service contracts, financial assistance agreements, and City facilities agreements must include this upward adjustment of wage rates to covere employees on July 1 of each year. In addition, Contractor agrees to require all of its subcontractors, sublessees, and concessionaires subject to the LWO to comply with the LWO and all applicable regulations and rules.  1. Exemption from Living Wage Ordinance. Pursuant to SDMC section 22.4215, this Contract may be exempt from the LWO. For a determination on this exemption, Contractor must complete the Living Wage Ordinance Application for Exemption.	Γhe d	Quantity/UM	Unit Price	Extended Price
Notes: Th	ne Terms and Conditions of this Purchase Order are available at ht	p://sandiego.go	v/purchasing/	Line Item Total \$	•
o ensure	e prompt payments, PO # must appear on all shipments ar o <i>Billing</i> Contact person at <i>Bill-To</i> address listed above	d invoices; all	invoices must be	PO Total \$	50,000.00