

Member of The University of Texas System

**Procurement and Business Services** Nacogdoches, Texas 75962-3030 Phone (936) 468-2206 \* Fax (936) 468-4282

Supplier:

Suregreen Inc. DBA: Evergreen Lawn Care

4601 NW Stallings Dr Nacogdoches TX 75964-1439

PO Number: **B2600190** 

Page 1

PO Date: 08/28/25

**Delivery Date:** 

CONFIRM RECEIPT OF PURCHASE ORDER AND **ACCEPTANCE OF DELIVERY DATE** BY EMAILING PURCHASE@SFASU.EDU.

ivancickn@sfasu.edu

Send Billing Invoice to:

Stephen F. Austin State University

P.O. Box 6085

Nacogdoches, TX 75962-6085

ATTN: Accounts Payable

Ship to: Procurement and Business Srvs

Austin Bldg 131 2102 Alumni Dr SFA Box 13030

Nacogdoches TX 75962

PURCHASE ORDER NO. MUST APPEAR ON ALL Terms: Net 30 SHIPPING DOCUMENTS AND INVOICES FOB: Not Applicable

ltem	Description		Quantity	Unit Cost	Total Cost
	Provide field and lawn care for the including, but not limited to, all Athle fields, campus grounds and outlying areas in accordance with Invitation #FIELDMAINT-FY25 opened on 08 Quantity and units shown are estiminternal purposes only. Payment shonly for actual goods or services re Prices are per application and on a basis to be determined by the SFA Representative and/or the Athletic Maintenance Representative.	etic g campus to Bid s/23/2024. eates for eall be made ceived. n as needed PPD Grounds			
Purc	chaser: Nicole Ivancic	(936) 4684472	ADDI	TIONAL CHARGE:	

Purchaser: Nicole Ivancic (936) 4684472 **DISCOUNT/TRADE-IN:** Vendor ID: 20003821 Collegiate Licensed:

Req No: TOTAL: CONTINUED Employee/Employee Relationship: Blanket Order: B2600190

**HUB Status:** Purchase Class: Competitive Solicitation



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Item	Description	Quantity	Unit Cost	Total Cost
1	Chemical/Fertilizer ratio mix shall be approved by the SFA PPD Grounds Representative and/or the Athletic Fields Maintenance Representative.  Unless otherwise indicated each application is per 1000 square feet RE: B2600190  000P98872B M & R, GROUNDS/LAND NOT OTHERWISE CLASS CAMPUS GROUNDS: -Field maintenance of both Physical Plant Campus Grounds and Intramural Fields; work includes all items/services listed in ITB# FIELDMAINT-FY25	SIFIED 165,000.00 SRV	1.0000	165,000.00
<u> </u>			•	*

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Item **Description** Quantity **Unit Cost Total Cost** (iContracts #231848). Escalation rate not to exceed 20% This PO is for the period: 09/01/2025 - 08/31/2026 All work is to be performed in a neat and workmanlike manner, site kept clean at all times, protection provided to avoid damage to landscaping and all adjoining property, including improvements, performed as quickly as possible consistent with best industry construction practices, and guaranteed for one (1) full year from date of completion against all defects. Contractor shall comply with all local, state

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ltem	Description	Quanti	ty	Unit Cost	Total Cost
	and federal orders, ordinances, laws, rules, and regulations of duly constituted authorities having jurisdiction over this work.  All work is to be completed as mutually agreed by and between the University and the Contractor. Failure to complete work (including clean-up) by the mutually agreed date shall be deemed as a breach of contract. Liquidated damages in the amount of \$500.00 per calendar da will be assessed, not as a penalty, but as liquidated damages for such breach of contract. Safe working conditions must be maintained on and around work site at all times. Barricades and other protective devices are to be used as necessary to prevent injury to persons or	y			
	h N!     (000) 400	4.470		TONAL CHARGE.	1

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m Description	Quantity	Unit Cost	Total Cost
property. All reasonable precautions are to be taken.  Payment will be made lump-sum upon completion or as otherwise mutually agreed between Contractor and the University.  The Contractor shall not commence work under this Contract until Contractor has obtained all the insurance required hereunder and certificates of such insurance have been filed with and reviewed by SFASU. Acceptance of the insurance certificates by SFASU shall not relieve or decrease the liability of the Contractor. If policies are not written for the amounts specified below (except Workers' Compensation and			

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Item **Description** Quantity **Unit Cost Total Cost** Employer's Liability), Contractor shall carry Excess Liability insurance for any difference in amounts specified. If Excess Liability insurance is provided, it shall follow the form of the primary policy. This insurance shall not be canceled, limited in scope of coverage, or non-renewed until after thirty (30) days prior written notice, or ten (10) days for non-payment of premium, has been given to the University. Contractor's insurance shall be deemed primary with respect to any insurance carried by Stephen F. Austin State University for liability arising out of operations under this Contract. The Board of Regents of The University of Texas

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Vendor Warrant Hold process runs nightly and terminates any vendors on hold. Vendor EPLS status verified by Purchaser.

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Item **Description** Quantity **Unit Cost Total Cost** System, Stephen F. Austin State University Campus shall be named as additional insured. This is not applicable to the Workers' Compensation policy. The Workers' Compensation and Employer's Liability policy will provide a waiver of subrogation in favor of the University. The Workers' Compensation insurance coverage must include the responsibility of the Contractor to provide coverage for every worker either under the Contractor's policy or under the policy provided by a subcontractor. The Contractor's policy shall provide that, in the event that a subcontractor's policy fails to provide workers' compensation coverage of a worker, that such insurance coverage is provided by the Contractor's

Purchaser:Nicole Ivancic(936) 4684472ADDITIONAL CHARGE:Vendor ID:20003821Collegiate Licensed:DISCOUNT/TRADE-IN:

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Terms: Net 30

FOB: Not Applicable

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Item	Description		Quantity	Unit Cost	Total Cost
	policy. Unless otherwise provided for here Contractor shall provide and maintain, Work covered in this Contract is compaccepted by SFASU, the minimum inscoverage as follows:  TYPE OF COVERAGE / LIMITS OF L Workers' Compensation Coverage OF Employer's Liability - \$1,000,000 occu Comprehensive General Liability -\$1,000,000 each occurrence -\$2,000,000 general aggregate -\$2,000,000 products/completed op Comprehensive Automobile Liability	until the pleted and urance  IABILITY R r/aggregate			
Pur	chaser: Nicole Ivancic	(936) 4684472	ADDIT	IONAL CHARGE:	

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Item	Description	Quantity	Unit Cost	Total Cost
Item 2	-\$1,000,000 ea accident- Combined Single Limit  000P98872B M & R, GROUNDS/LAND NOT OTHERWISE CLASSIFII ATHLETICS/SPORTS FIELDS: -Field maintenance of all Athletic fields around campus, excluding Intramural fields; work includes all items/services listed in ITB# FIELDMAINT-FY25, (iContracts #231848).		Unit Cost 1.0000	Total Cost 90,000.00
	Escalation rate not to exceed 20%  This PO is for the period: 09/01/2025 - 08/31/2026			

Purchaser: Nicole Ivancic(936) 4684472ADDITIONAL CHARGE:Vendor ID: 20003821Collegiate Licensed:DISCOUNT/TRADE-IN:

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	All work is to be performed in a neworkmanlike manner, site kept of protection provided to avoid damand all adjoining property, including improvements, performed as quicconsistent with best industry conspractices, and guaranteed for one from date of completion against a Contractor shall comply with and federal orders, ordinances, laregulations of duly constituted aujurisdiction over this work.  All work is to be completed as managreed by and between the University Contractor. Failure to complete were sentended.	eat and ean at all times, age to landscaping ng ckly as possible struction e (1) full year all defects. all local, state aws, rules, and thorities having utually ersity and the			
Purc	chaser: Nicole Ivancic	(936) 4684472	ADDI	TIONAL CHARGE:	II.

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tem	Description	Quantity	Unit Cost	Total Cost
	clean-up) by the mutually agreed date shall be deemed as a breach of contract. Liquidated damages in the amount of \$500.00 per calendar day will be assessed, not as a penalty, but as liquidated damages for such breach of contract. Safe working conditions must be maintained on and around work site at all times. Barricades and other protective devices are to be used as necessary to prevent injury to persons or property. All reasonable precautions are to be taken. Payment will be made lump-sum upon completion or as otherwise mutually agreed between Contractor and the University.			
Dl.			DITIONAL CHARGE.	

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	The Contractor shall not commence Contract until Contractor has obtain insurance required hereunder and such insurance have been filed with by SFASU. Acceptance of the insucertificates by SFASU shall not relidecrease the liability of the Contract of policies are not written for the amspecified below (except Workers' Cemployer's Liability), Contractor shexcess Liability insurance for any camounts specified. If Excess Liability primary policy.  This insurance shall not be candon.	ned all the certificates of and reviewed arance eve or ctor. counts compensation and all carry lifterence in lity insurance of the			
Durc	chaser: Nicole Ivancic	(036) 4684472	ADDIT	IONAL CHARGE:	

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m Description	Quantity	Unit Cost	Total Cost
in scope of coverage, or non-renewed until after thirty (30) days prior written notice, or ten (10) days for non-payment of premium, has been given to the University.  Contractor's insurance shall be deemed primary with respect to any insurance carried by Stephen F. Austin State University for liability arising out of operations under this Contract.  The Board of Regents of The University of Texas System, Stephen F. Austin State University Campus shall be named as additional insured. This is not applicable to the Workers' Compensation policy.  The Workers' Compensation and Employer's Liability policy will provide a waiver of subrogation in favor of the University.			

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m to the property of the prope	he Workers' Compensation insurant to the responsibility of the provide coverage for every worked provide coverage for every worked to provide coverage for every worked to the rovided by a subcontractor. The Colicy shall provide that, in the even ubcontractor's policy fails to provide ompensation coverage of a worked surance coverage is provided by tolicy.  Unless otherwise provided for he contractor shall provide and maintator of covered in this Contract is concepted by SFASU, the minimum is overage as follows:	e Contractor or either under policy contractor's t that a e workers' r, that such the Contractor's erein, the in, until the mpleted and			
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TYPE OF COVERAGE / LIMITS OF LIABILITY
Workers' Compensation Coverage OR
Employer's Liability - \$1,000,000 occur/aggregate
Comprehensive General Liability
-\$1,000,000 each occurrence
-\$2,000,000 products/completed operations aggr
Comprehensive Automobile Liability
-\$1,000,000 ea accident- Combined Single Limit

Purchaser:Nicole Ivancic(936) 4684472ADDITIONAL CHARGE:.00Vendor ID:20003821Collegiate Licensed:DISCOUNT/TRADE-IN:.00Req No:<br/>Blanket Order:Employee/Employee Relationship:TOTAL:255,000.00

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