



# Stephen F. Austin State University

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

ivancickn@sfasu.edu

Page 1

PO Number: **B2600190**

PO Date: **08/28/25**

Delivery Date:

**CONFIRM RECEIPT OF PURCHASE ORDER AND  
ACCEPTANCE OF DELIVERY DATE  
BY EMAILING PURCHASE@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 Svcs  
Austin Bldg 131  
2102 Alumni Dr  
SFA Box 13030  
Nacogdoches TX 75962

Terms: Net 30

FOB: Not Applicable

**PURCHASE ORDER NO. MUST APPEAR ON ALL  
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Item	Description	Quantity	Unit Cost	Total Cost
	<p>Provide field and lawn care for the SFASU campus including, but not limited to, all Athletic fields, campus grounds and outlying campus areas in accordance with Invitation to Bid #FIELDMAINT-FY25 opened on 08/23/2024.</p> <p>-----</p> <p>Quantity and units shown are estimates for internal purposes only. Payment shall be made only for actual goods or services received.</p> <p>-----</p> <p>Prices are per application and on an as needed basis to be determined by the SFA PPD Grounds Representative and/or the Athletic Fields Maintenance Representative.</p> <p>-----</p>			

Purchaser: Nicole Ivancic

(936) 4684472

ADDITIONAL CHARGE:

Vendor ID: **20003821**

Collegiate Licensed:

DISCOUNT/TRADE-IN:

Req No:

Employee/Employee Relationship:

TOTAL: **CONTINUED**

Blanket Order: **B2600190**

HUB Status:

Purchase Class: **Competitive Solicitation**

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
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 CLASSIFIED CAMPUS GROUNDS: -Field maintenance of both Physical Plant Campus Grounds and Intramural Fields; work includes all items/services listed in ITB# FIELDMAINT-FY25	165,000.00 SRV	1.0000	165,000.00

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	(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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	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 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			

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	<p>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.</p> <p>----</p> <p>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</p>			

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	<p>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.</p> <p>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.</p> <p>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.</p> <p>The Board of Regents of The University of Texas</p>			

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	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			

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	<p>policy. Unless otherwise provided for herein, the Contractor shall provide and maintain, until the Work covered in this Contract is completed and accepted by SFASU, the minimum insurance coverage as follows:</p> <p>----</p> <p>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 general aggregate -\$2,000,000 products/completed operations aggr Comprehensive Automobile Liability</p>			

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Item	Description	Quantity	Unit Cost	Total Cost
2	<p>-\$1,000,000 ea accident- Combined Single Limit ----</p> <p>000P98872B M &amp; R, GROUNDS/LAND NOT OTHERWISE CLASSIFIED 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). ----</p> <p>Escalation rate not to exceed 20% ----</p> <p>This PO is for the period: 09/01/2025 - 08/31/2026 ----</p>	90,000.00 SRV	1.0000	90,000.00

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	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. -----			

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	<p>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.</p> <p>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.</p> <p>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.</p>			

Purchaser: Nicole Ivancic

(936) 4684472

**ADDITIONAL CHARGE:**

Vendor ID: **20003821**

Collegiate Licensed:

**DISCOUNT/TRADE-IN:**

Req No:

Employee/Employee Relationship:

**TOTAL: CONTINUED**

Blanket Order: **B2600190**

HUB Status:

Purchase Class: **Competitive Solicitation**

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



# Stephen F. Austin State University

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

ivancickn@sfasu.edu

Page 14

PO Number: **B2600190**

PO Date: **08/28/25**

Delivery Date:

**CONFIRM RECEIPT OF PURCHASE ORDER AND  
ACCEPTANCE OF DELIVERY DATE  
BY EMAILING PURCHASE@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 Svcs  
Austin Bldg 131  
2102 Alumni Dr  
SFA Box 13030  
Nacogdoches TX 75962

Terms: Net 30

FOB: Not Applicable

**PURCHASE ORDER NO. MUST APPEAR ON ALL  
SHIPPING DOCUMENTS AND INVOICES**

Item	Description	Quantity	Unit Cost	Total Cost
	<p>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 policy.</p> <p>Unless otherwise provided for herein, the Contractor shall provide and maintain, until the Work covered in this Contract is completed and accepted by SFASU, the minimum insurance coverage as follows:</p>			

Purchaser: Nicole Ivancic

(936) 4684472

ADDITIONAL CHARGE:

Vendor ID: **20003821**

Collegiate Licensed:

DISCOUNT/TRADE-IN:

Req No:

Employee/Employee Relationship:

TOTAL: **CONTINUED**

Blanket Order: **B2600190**

HUB Status:

Purchase Class: **Competitive Solicitation**

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FOB: Not Applicable

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SHIPPING DOCUMENTS AND INVOICES**

Item	Description	Quantity	Unit Cost	Total Cost
	----- 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 general aggregate -\$2,000,000 products/completed operations aggr Comprehensive Automobile Liability -\$1,000,000 ea accident- Combined Single Limit -----			

Purchaser: Nicole Ivancic

(936) 4684472

ADDITIONAL CHARGE:

.00

Vendor ID: **20003821**

Collegiate Licensed:

DISCOUNT/TRADE-IN:

.00

Req No:

TOTAL:

255,000.00

Blanket Order: **B2600190**

Employee/Employee Relationship:

HUB Status:

Purchase Class: **Competitive Solicitation**

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