

Member of The University of Texas System

Procurement and Business Services Nacogdoches, Texas 75962-3030

Supplier:

Phone (936) 468-2206 * Fax (936) 468-4282

Universal Time Equipment Co. DBA: Universal Time Equipment Co PO Box 7279 Tyler TX 75711-7279 PO Number: **P2600637**

Page 1

PO Date: 09/01/25

Delivery Date: 08/31/26

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

joneskk2@sfasu.edu

Send Billing Invoice to:

Stephen F. Austin State University

P.O. Box 6085

Nacogdoches, TX 75962-6085 ATTN: Accounts Payable Ship to: Amanda Willoughby

Physical Plant Physical Plant 101 2104 Wilson Dr SFA Box 13031

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
1	Quantity and units shown are estimates for internal purposes only. Payment shall be made only for actual goods or services received For the period: 09/01/2025 - 08/31/2026 This PO shall not exceed 15,000.00. 000P93609A M & R, FIRE ALARM EQUIPMENT Miscellaneous repairs on the Edward Fire Alarm Systems as needed (including miscellaneous parts) All work is to be performed in a neat and workmanlike manner, site kept clean at all times,	15,000.00 SRV	1.0000	15,000.00
_				

Purchaser: Kim Jones (936) 4686551 ADDITIONAL CHARGE:

Vendor ID: 20003621 Collegiate Licensed: DISCOUNT/TRADE-IN:

Req No:
Blanket Order:

Employee/Employee Relationship:

TOTAL: CONTINUED

HUB Status: Purchase Class: NonCompetitive

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



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	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 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			
	Shanor 1/2 - 1 (200) 1000551	1.55	ITIONAL CHARCE.	

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Item	Description	Quantity	Unit Cost	Total Cost
	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. The Contractor shall not commence work under this Contract until Contractor has obtained all the			
D	chaser: Vim Janea (020) 4696554	ADI	NITIONAL CHARGE:	

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Item	Description		Quantity	Unit Cost	Total Cost
	insurance required hereunder and of such insurance have been filed with by SFASU. Acceptance of the insure certificates by SFASU shall not relied decrease the liability of the Contract If policies are not written for the amspecified below (except Workers' Contractor shall be such that it is provided, it is insurance for any damounts specified. If Excess Liability is provided, it shall follow the form of primary policy. This insurance shall not be cancern in scope of coverage, or non-renew thirty (30) days prior written notice,	a and reviewed rance eve or tor. ounts ompensation and all carry ifference in ity insurance of the reled, limited red until after			
Dure	chaser: Kim Jones	(036) 4686551	ADDIT	IONAL CHARGE:	

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DISCOUNT/TRADE-IN: Vendor ID: 20003621 Collegiate Licensed:

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Item Quantity **Unit Cost Total Cost** Description 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 Stephén 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. The Workers' Compensation insurance coverage must include the responsibility of the Contractor

Purchaser: Kim Jones (936) 4686551 ADDITIONAL CHARGE: DISCOUNT/TRADE-IN: Vendor ID: 20003621 Collegiate Licensed:

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Item **Description** Quantity **Unit Cost Total Cost** 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. 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: TYPE OF COVERAGE / LIMITS OF LIABILITY

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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: Kim Jones(936) 4686551ADDITIONAL CHARGE:.00Vendor ID: 20003621Collegiate Licensed:DISCOUNT/TRADE-IN:.00Req No: Blanket Order:Employee/Employee Relationship:TOTAL:15,000.00

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