PURCHASE ORDER

CITY OF LAS VEGAS
1700 North Grand Avenue
Las Vegas, New Mexico 87701
Phone: (505) 454-1401 Fax: (505) 454-8027

PO Number: 211791 **Date:** 06/03/2021

Request #: 282426 **Vendor #:** 02800

ISSUED TO: SUPERIOR AMBULANCE SERVICE INC
P.O. BOX 6482
ALBUQUERQUE, NM 87197

SHIP TO: City of Las Vegas
Attn:Purchasing Department
1700 N. Grand Avenue
Las Vegas, NM 87701

Vendor Fax #: (505) 830-1260

ITEM	UNITS	DESCRIPTION	PRICE	PROJ	GL ACCOUNT NUMBER	AMOUNT
1	1	Monthly Ambulance Services June 2021 EMERGENCY 13-1-127	14,583.33		101-5400-700-7321	14,583.33

DEPARTMENT ORDER

Approved By: _____ **Date:** 6/4/2021

SUBTOTAL:	14,583.33
TAX:	0.00
SHIPPING:	0.00
TOTAL	14,583.33

1. Original invoice plus one copy must be sent to: City of Las Vegas, 1700 North Grand Avenue, Las Vegas, NM 87701.
2. Payment may be expected within 30 days of receipt of goods, unless otherwise stated.
3. C.O.D. shipment will not be accepted.
4. Purchase Order numbers must appear on all shipping containers, packing slips and invoices. Failure to comply with the above request may delay payment.
5. All goods are to be shipped F.O.B. Destination unless otherwise stated.
6. All materials and services are subject to approval based on the description on the face of the purchase order or appendages thereof. Substitutions are not permitted without approval of the Requesting Department. Material not approved will be returned at no cost to the City.
7. All goods and equipment must meet or exceed all necessary city, state and federal standards and regulations.
8. Vendor or manufacturer bears risk of loss or damage until property received and/or installed.
9. Seller acknowledges that the buyer is an equal opportunity employer. Seller will comply with all equal opportunity laws and regulations that are applicable to it as a supplier of the buyer.
10. The City is exempt from all federal excise and state tax – ID# 85-6000149

Finance Dept. (505) 454-1401 FAX (505) 454-8027

CITY OF LAS VEGAS REQUISITION FOR PURCHASE

282426

PURCHASE ORDER NO.: _____

REQUIREMENTS — CHECK APPROPRIATE BOX — DATE: 6/3/2021

PURCHASES UNDER RESOLUTION #14-18 STATE PROCUREMENT CODE:

- ☐ $0 TO $19,999.99 — Best Obtainable Price; Requires 3 telephoned, written, faxed or e-mailed quotes;
- ☐ $20,000.00 TO $59.999.99 — Requires 3 written and signed quotes; (Goods or services)
- ☐ $60,000.00 AND OVER — Formal Process (Requires RFQ, RFP, RFB, etc.)

☐ BID NO.: _____ – _____ AWARDED: _____/_____/_____; CONTRACT NO.: _____.

(RECORD BID NUMBER, AWARDED DATE, AND CONTRACT NUMBER ABOVE)

- ☐ SPD CONTRACT; SPD NO.: _____ EXPIRES: _____/_____/_____.
- ☐ EXEMPT PURCHASE; Provide Section No. _____.
- ☐ GSA CONTRACT; GSA NO.: _____-_____ EXPIRES: _____/_____/_____.
- ☐ PROFESSIONAL SERVICES; _____
- ☐ SOLE SOURCE: REQUIRES DETERMINATION AND MUST BE POSTED ON CLV WEBSITE FOR 30 DAYS PRIOR TO PROCURING GOODS AND/OR SERVICES.
- ☑ ~~OTHER CITY~~ CONTRACT: NO: 2623-13 EXPIRES_____/_____/_____
- ☐ EMERGENCY; ____ SECTIONS 13-1-127 STATE PROCUREMENT CODE

STATEMENT OF NEED: *(Must Complete)*

Monthly Ambulance Services

IN COMPLIANCE WITH THE PROCUREMENT CODE #14-18 THE FOLLOWING QUOTES WERE OBTAINED

DATE	NAME OF VENDOR	PHONE NUMBER	PERSON CONTACTED	PRICE QUOTED

(If needed, attach additional quote documentation to this requisition)

LINE	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	SUB TOTAL
1		ea	Monthly Ambulance Services	1.0	14,583.33

VENDOR: Superior Ambulance TOTAL: $ 14,583.33

ADDRESS:

NM CRS NO.: FEDERAL TAX NO.:

I CERTIFY THAT THIS PURCHASE IS NECESSARY AND THAT THE REQUESTED ITEMS WILL BE PURCHASED AT THE LOWEST BID OR BEST OBTAINABLE PRICE.

BUDGET $ 190,000.00

EXPENDED TO DATE $ 160,416.63

CURRENT EXPENSE $ 14,583.33

BALANCE $ 14,583.33

Donna Castro

SIGNATURE OF PERSON REQUESTING

101-5400-700-7321

FUND DEPARTMENT ACTIVITY

APPROVED BY: [signature] 6-3-21 BUDGET AVAILABLE YES: X NO: _____

WHITE COPY: ACCOUNTS PAYABLE YELLOW COPY: PURCHASING PINK COPY: DEPARTMENT

STATE OF NEW MEXICO
EMERGENCY DETERMINATION FORM

The emergency procurement method (NMSA 1978, Section 13-1-127) may only be used when there exists a threat to public health, welfare, safety or property requiring procurement under emergency conditions. The existence of the emergency condition creates an immediate and serious need for services, construction or items of tangible personal property that cannot be met through normal procurement methods and the lack of which would seriously threaten:

1. the functioning of government;
2. the preservation or protection of property; or
3. the health or safety of any person.

I. Name of Agency: City of Las Vegas, NM

Agency Chief Procurement Officer: Helen Vigil

Telephone Number: 505-454-1401 Ext. 1106

II. Name of Contractor: Superior Ambulance Service

Address of Contractor: P.O. Box 6482, Albuquerque, NM 87197

Amount of prospective contract: $14,583.33

Term of prospective contract: 1 month

III. Please thoroughly list the services (scope of work), construction or items of tangible personal property of the contract:

Provides ambulance services for the City of Las Vegas, San Miguel County and Pecos areas.

IV. Provide an explanation for the justification of the procurement including a description of the emergency condition(s) requiring use of emergency procurement and the practicable competition utilized in compliance with NMSA 1978, Section 13-1-127.

The City of Las Vegas is currently in the process of changing vendors who provide ambulance service to the City and surrounding areas; however, there is not a signed contract in place at the moment. Superior is continuing the service at this time but the contract has expired and these service must remain in place for the safety of the general public.

V. Please describe what measures are being taken to minimize the duration and effect of this particular emergency procurement (for example: is the emergency only in place until a competitive process can be completed, etc.).

A new contract has been negotiated but has not been signed by all parties involved.

VI. Describe what measures the Agency will take in the future to prevent/mitigate use of an emergency procurement under similar circumstances.

The City of Las Vegas has been monitoring all on going contracts to avoid having to use emergency procurement.

Certified by: Date: 6/3/2021

Agency Chief Procurement Officer

Approved by: Date: 6/4/21

Donna Castro

Department Director

Approved by: Date: 6-3-21

Finance Director

Superior Ambulance Service, Inc

Quotation

PO Box 6482
Albuquerque, New Mexico 87197-6482
Phone: 505-247-8840

DATE 6/3/2021
Quotation # 100
Customer ID

Quotation For:

Quotation valid until: 6/13/2021

City of Las Vegas, New Mexico
Attn: Finance
1700 N. Grand
Las Vegas, New Mexico 87701
505-454-1401

Prepared by: Chris Archuleta

Comments or Special Instructions: *None*

SALESPERSON	P.O. NUMBER	SHIP DATE	SHIP VIA	F.O.B. POINT	TERMS
					Due on receipt

QUANTITY	DESCRIPTION		UNIT PRICE	TAXABLE?	AMOUNT
3	May, June and July 2021	Monthly Subsidy	$ 14,583.33	N	$ 43,749.99

SUBTOTAL	$ 43,749.99
TAX RATE	
SALES TAX	$ -
OTHER	$ -
TOTAL	$ 43,749.99

If you have any questions concerning this quotation, contact name, phone number, e-mail.

THANK YOU FOR YOUR BUSINESS!