



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

PURCHASE ORDER

PO Number: 230816

Date: 10/14/2022

Request #: 301070

Vendor #: 02966

ISSUED TO: ULBARRI'S USED PARTS & CARS & 24 HOUR TOWING LL
601 SOUTH GRAND
LAS VEGAS, NM 87701

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

Vendor Fax #: (505) 454-1964

| ITEM | UNITS | DESCRIPTION | PRICE | PROJ | GL ACCOUNT NUMBER | AMOUNT |
|------|-------|-----------------------------------|--------|------|-------------------|--------|
| 1 | 1 | Towing Service - G00507 Vin#88593 | 125.00 | | 282-6200-750-7408 | 60.00 |
| | | EMERGENCY 13-1-127 | | | 282-6300-750-7408 | 65.00 |
| | | EMERGENCY 13-1-127 | | | | |

DEPARTMENT ORDER

Approved By:

Date: 10/17/2022

| | |
|------------------|--------|
| SUBTOTAL: | 125.00 |
| TAX: | 0.00 |
| SHIPPING: | 0.00 |
| TOTAL | 125.00 |

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

PURCHASE ORDER NO.:

301070

REQUIREMENTS

CHECK APPROPRIATE BOX

DATE: _____

10/14/22

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.: _____ EXPIRES: ____/____/____
(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: _____ EXPIRES: ____/____/____

☒ EMERGENCY; ____ SECTIONS 13-1-127 STATE PRODUREMENT CODE

STATEMENT OF NEED: (Must Complete).

STATEMENT OF NEED: (Must Complete)
Hot Shot Truck was damaged in a vehicle accident. Need to be towed. State Police called for tow truck.

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

| DATE | NAME OF VENDOR | PHONE NUMBER | PERSON CONTACTED | PRICE QUOTED |
|----------|----------------|--------------|------------------|--------------|
| 10/12/22 | Walmart | 454-1964 | | |
| | | | | |
| | | | | |

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

[illegible]

VENDOR:

Urbarn's

TOTAL: \$

12500

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 \$ _____

EXPENDED TO DATE \$ _____

CURRENT EXPENSE \$ _____

BALANCE \$ _____

SIGNATURE OF PERSON REQUESTING

282-6200-750-7408 6500
282-6300-750-7408 6500

FUND

DEPARTMENT

ACTIVITY

APPROVED BY:

D. Chang 10/17/22

BUDGET AVAILABLE

YES: _____ 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:

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

I. Name of Agency: **City of Las Vegas Senior Center Program**

Agency Chief Procurement Officer: **Helen Vigil**
Telephone Number: **505-454-1401**

Name of Contractor: **Ulibarri's Used Cars, Used Parts & 24 Hour Towing LLC**
Address of Contractor: **601 South Grand, Las Vegas NM 87701**
Phone: **505-454-1964**

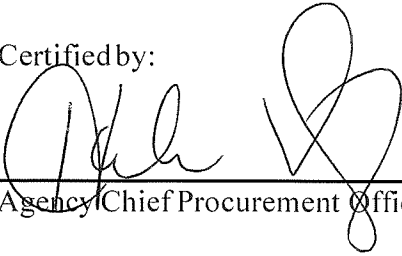
Amount of prospective contract: **\$125.00**

Term of prospective contract: **1 time cost**

Please thoroughly list the services (scope of work), construction or items of tangible personal property of the contract: **Truck #4 was in a collision. It needed to be towed.**

Certified by:


Date: 10/14/2022



Agency Chief Procurement Officer

Agency Approval by:

Date: _____

 10/17/2022

Governmental Entity Head or Designee

505-617-4898

| | | | | | | | | | | | | |
|---|---|--|--------------|--|----------------|--|------------------------|--|--|-------------------|-------------------------------|--|
| NAME <i>One of her keys</i> | | | | | | PHONE | | DATE 10/2/82 | | TIME PM AM | | |
| ADDRESS | | | | | | CITY <i>Lakewood</i> | | STATE <i>NM</i> | | ZIP | | |
| V N | | | | | | | | | | YEAR <i>80</i> | MAKE/MOD/COLOR <i>Ford</i> | |
| DRIVER NAME <i>ABRIANNA</i> | | | EXTRA PERSON | | REGISTRATION # | TAG # | | REQUESTED BY: | | | | |
| INSURANCE CO. | | | AGENT | | INS. PHONE | <input type="radio"/> CASH <input type="radio"/> CHARGE <input type="radio"/> CR. CARD | | VEHICLE MILEAGE BEFORE TOWING CLOCE MILEAGE AFTER TOWING | | | | |
| TOWED FROM | | | | | | TO: | | | | | | |
| MILEAGE | | | | SERVICE TIME | | | | EXTRA TIME | | | | |
| FINISH _____ | | | | FINISH _____ | | | | FINISH _____ | | | | |
| START _____ | | | | START _____ | | | | START _____ | | | | |
| TOTAL | | | | TOTAL | | | | TOTAL | | | | |
| <input type="radio"/> CALL NO. <input type="radio"/> CALL TIME <input type="radio"/> TYPE CALL <input type="radio"/> _____ | | | | <input type="radio"/> START <input type="radio"/> FLAT TIRE <input type="radio"/> LOCKOUT <input type="radio"/> INSURED | | | | <input type="radio"/> WRECK <input type="radio"/> CARRIER <input type="radio"/> FLAT BED <input type="radio"/> TOW | | | | |
| | | | | | | | | - SPECIAL EQUIPMENT - | | | | |
| | | | | | | | | <input type="radio"/> SINGLE LINE WINCHING <input type="radio"/> DOUBLE LINE WINCHING <input type="radio"/> SNATCH BLOCKS <input type="radio"/> SCOTCH BLOCKS | | | | |
| | | | | | | | | <input type="radio"/> DOLLY <input type="radio"/> FUEL OR BATTERY _____ GAL. | | | | |
| - DAMAGE RELEASE - | | | | | | | | | | | | |
| I HAVE BEEN ADVISED THAT MY VEHICLE MAY BE DAMAGED IF WINCHED, TOWED, UNLOCKED, OR LEFT ON UNATTENDED PREMISES. I RECOGNIZE THE DIFFICULTY INVOLVED AND I AGREE NOT TO HOLD THE TOWING SERVICE RESPONSIBLE FOR SUCH DAMAGE OR ACTS OF NATURE BEYOND THE TOWING SERVICE'S CONTROL. | | | | | | | | | | | | |
| REMARKS: _____ _____ _____ _____ | | | | | | LABOR | | | | | | |
| | | | | | | MILEAGE CHARGE | | | | | | |
| | | | | | | TOWING CHARGE | | <i>100.00</i> | | | | |
| | | | | | | ROAD SERVICE CHARGE | | | | | | |
| | | | | | | STORAGE CHARGE | | | | | | |
| | | | | | | WINCHING | | | | | | |
| VEHICLE WILL NOT BE RELEASED UNTIL TOWING SERVICE IS PAID | | | | | | CLEAN-UP | | | | | | |
| | | | | | | SUB-TOTAL | | <i>Rec'd</i> | | <i>25.00</i> | | |
| | | | | | | TAX | | | | | | |
| | | | | | | TOTAL | | <i>125.00</i> | | <i>25.00</i> | | |
| X | SIGNATURE OF VEHICLE OWNER OR AGENT <i>[Signature]</i> | | | | | | DATE <i>10/2/82</i> | | | | | |



City of Las Vegas

1700 N. Grand Avenue | Las Vegas, NM 87701 | T 505.454.1401 | lasvegasnm.gov

Mayor Louie A. Trujillo

EMERGENCY JUSTIFICATION

To: Helen Vigil, Purchasing Agent

From: 
Wanda Salazar, Community Services Director

Re: Emergency Towing of #4 Hot Shot Truck – VIN# 1HTMF1EF2HFA88593, Plate #G-00507

Date: October 14th, 2022

On Wednesday, October 12th, 2022, Adrianna Lucero was delivering meals to seniors in the Camp Luna Area. She was hit on the driver side, front fender and door, causing the front driver axle to break. State Police was called. State Police also called for the truck to be towed. The company that was called was Ulibarri's Used Cars, Used Parts & 24 hour Towing, LLC. This company is owned by City of Las Vegas Councilman, David Ulibarri. The decision of the emergency removal of the city vehicle from county roads was made by NM State Police, not by City Staff. The vehicle was towed to the Las Vegas Senior Center.

Please accept this explanation as justification for the Emergency Towing Invoice attached. If you have any questions, please give me a call. Thank you

David Ulibarri
Councilor Ward I

Michael Montoya
Councilor Ward 2

Barbara Casey
Councilor Ward 3

David G. Romero
Councilor Ward 4