

STATE OF NEW MEXICO RMP – COOPERATOR ENGINE RATE SHEET

1. ORDERING OFFICE/ADMINISTRATIVE OFFICE FOR PAYMENT (name and address)		AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS RATE SHEET				
EMNRD-FORESTRY DIVISION LAS VEGAS DISTRICT HC 33 BOX 109 #4 LAS VEGAS, NM 87701 PHONE 505-425-7472 FAX 505-425-9360		2. AGREEMENT NUMBER JPA 03-521.23-0 03		3. EFFECTIVE DATES a. Beginning _____ b. Ending _____		
		4. COOPERATOR (name and address) City of Las Vegas P.O. Box 160 Las Vegas, NM 87701 b. TIN: 85-60000149		5. I-SUITE CODING EQUIPMENT AGENCY - NM		
c. Telephone Number (day) _____ d. Telephone Number (night) _____		6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES FURNISHED BY <input checked="" type="checkbox"/> COOPERATOR <input type="checkbox"/> GOVERNMENT				
7. WORK RATE IN BOX 11 & 12 <input checked="" type="checkbox"/> STAFFED RATE <input type="checkbox"/> UNSTAFFED RATE		8. TYPE OF COOPERATOR ("X" appropriate boxes) <input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> COUNTY				
9. ITEM DESCRIPTION (include make, model, year, G- Plate, VIN, and accessories)	10. NUMBER OF OPERATORS	11. WORK OR DAILY a. rate	b. unit	12. SPECIAL c rate	d. unit	13. GUARANTEE (8 or more hours)
a. ENGINE – TYPE 1 07 KENWORTH T300 VIN 2NKMHZ8X17M195943 G-64657	3	\$220.00	HOURLY			
b. ENGINE – TYPE 1 05 KENWORTH T300 VIN 2NKMHZ8X66M118418 G-63125	3	\$220.00	HOURLY			
c. ENGINE – TYPE 1 70 CARGO B7 VIN 01252033 G33568	3	\$220.00	HOURLY			
d. ENGINE- TYPE 6 08 FORD 550 VIN 1FDAX57R18EC37043 G-72926	3	\$154.00	HOURLY			
14. SPECIAL PROVISIONS Operator(s) will be furnished by the cooperator and work rate includes personnel. Guarantee For each calendar day that equipment is under hire payment will be made for a minimum guarantee of at least 8 hours. For the 1 st and last day payment will be based on actual hours worked and travel, the guarantee will not apply. Fuel surcharge beginning and ending mileage will be documented daily on the Emergency Equipment Shift Ticket(s), if the daily total exceeds 100 miles then miles exceeding 100 will be compensated at a rate of .44 a mile. Finance Section will collect and post Emergency Equipment Shift Tickets for equipment for each operational period. Upon checkout/demobilization cooperator will receive all original Emergency Equipment Shift Ticket(s), OF-286 Emergency Equipment Use Invoice(s) and copies of Pre-Use and Release Inspections.						
15. FISCAL OR AUTHORIZED AGENT'S SIGNATURE		16. DATE	17. FORESTRY DIVISION AUTHORIZED SIGNATURE		18. DATE	
19. PRINT NAME AND TITLE			20. PRINT NAME AND TITLE			

14. SPECIAL PROVISIONS

ENGINE

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18. DATE

19. PRINT NAME AND TITLE

20. PRINT NAME AND TITLE