

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 2

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

BPA NO.

1. DATE OF ORDER **SEP 08 2008**

2. CONTRACT NO. (if any)
NRC-42-07-481

6. SHIP TO:

3. ORDER NO. 0049
MODIFICATION NO.

4. REQUISITION/REFERENCE NO.
42-07-481T049
NRO-08-257

a. NAME OF CONSIGNEE
U.S. Nuclear Regulatory Commission

b. STREET ADDRESS
Attn: David D'Abate, 301-415-0667

5. ISSUING OFFICE (Address correspondence to)
U.S. Nuclear Regulatory Commission
Div. of Contracts
Attn: Kala Shankar, 301-492-3638
Mail Stop TWB-01-B10M
Washington, DC 20555

c. CITY
Washington

d. STATE
DC

e. ZIP CODE
20555

7. TO:

f. SHIP VIA

a. NAME OF CONTRACTOR
N J NUMARK ASSOCIATES INC.
NUMARK ASSOCIATES, INC.

b. COMPANY NAME

8. TYPE OF ORDER

☐ a. PURCHASE

☒ b. DELIVERY

REFERENCE YOUR
Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.

Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.

c. STREET ADDRESS
1220 19TH ST NW STE 500

d. CITY
WASHINGTON

e. STATE
DC

f. ZIP CODE
200362444

9. ACCOUNTING AND APPROPRIATION DATA
825-15-171-111; Q-4012; 252A; 31X0200
Obligate \$40,000
Contractor DUNS: 788247377

10. REQUISITIONING OFFICE NRO

11. BUSINESS CLASSIFICATION (Check appropriate box(es))

☒ a. SMALL ☐ b. OTHER THAN SMALL ☐ c. DISADVANTAGED ☐ d. WOMEN-OWNED ☐ e. HUBZone ☐ f. EMERGING SMALL BUSINESS

12. F.O.B. POINT
Destination

13. PLACE OF

14. GOVERNMENT B/L NO.

15. DELIVER TO F.O.B. POINT
ON OR BEFORE (Date)

16. DISCOUNT TERMS

a. INSPECTION

b. ACCEPTANCE

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Issuance of Task Order No. 49 under Contract No. NRC-42-07-481</p> <p>Title: "Review of FSAR Sections 8, 9.5.3, 14.2, 14.3.6 and 16 (3.8) of SCOL for Bell Bend"</p> <p>Period of Performance: 09/08/2008 - 09/07/2010 Estimated Reimbursable Cost: \$113,149 Fixed Fee: \$7,920 Total Cost Plus Fixed Fee: \$121,069</p> <p>Funding in the amount of \$40,000 is being provided.</p> <p>See continuation pages</p>					

18. SHIPPING POINT

19. GROSS SHIPPING WEIGHT

20. INVOICE NO.

21. MAIL INVOICE TO:

SEE BILLING
INSTRUCTIONS
ON
REVERSE

a. NAME
U.S. Nuclear Regulatory Commission
See Attachment 7 of the basic contract

b. STREET ADDRESS (or P.O. Box)
Attn: (NRC-42-07-481-T049)

c. CITY
Washington

d. STATE
DC

e. ZIP CODE
20555

17(h)
TOTAL
(Cont.
pages)

17(i).
GRAND
TOTAL

22. UNITED STATES OF AMERICA
BY (Signature)

23. NAME (Typed)
Kala Shankar
Contracting Officer

TITLE: CONTRACTING/ORDERING OFFICER

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

SUNSI REVIEW COMPLETE

OCT 03 2008

OPTIONAL FORM NO. 34 (2006)
PRESCRIBED BY GSA FPMR 48 CFR 53.213(f)

In accordance with Section G.4, Task Order Procedures, of Contract No. NRC- 42-07-481, this definitizes Task Order No. 49. The effort shall be performed in accordance with the attached Statement of Work.

Task Order No. 49 shall be in effect twenty four months from date of award, with a cost ceiling of \$121,069. The amount of \$113,149 represents the estimated reimbursable costs, and the amount of \$7,920 represents the fixed fee.

The amount obligated by the Government with respect to this task order is \$40,000, of which approximately \$38,095.24 represents the estimated reimbursable costs, and the amount of \$1,904.76 represents the fixed fee.

The issuance of this task order does not amend any terms or conditions of the subject contract.

Your contacts during the course of this task order are:

Technical Matter: David D'Abate
Project Officer
301-415-0667

Contractual Matters: Kala Shankar
Contract Specialist
301-492-3838

Acceptance of Task Order No. 49 should be made by having an official, authorized to bind your organization, execute three copies of this document in the space provided and return two copies to the Contract Specialist at the address identified in Block No. 5 of the OF 347. You should retain the third copy for your records.

ACCEPTANCE

NAME

President

TITLE

9/5/08

DATE