

# ORDER FOR SUPPLIES OR SERVICES

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

BPA NO.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                |                                                                                                                                                                                            |  |                                                                  |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------|----------------|
| 1. DATE OF ORDER<br><b>09-23-2011</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                | 2. CONTRACT NO. (If any)<br>NRC-10-08-419                                                                                                                                                  |  | 6. SHIP TO:                                                      |                |
| 3. ORDER NO.<br>NRCT027                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                | 4. REQUISITION/REFERENCE NO.<br>ADM-11-432                                                                                                                                                 |  | a. NAME OF CONSIGNEE<br>U.S. Nuclear Regulatory Commission       |                |
| 5. ISSUING OFFICE (Address correspondence to)<br>U.S. Nuclear Regulatory Commission<br>Div. of Contracts<br>Attn: James Leedom<br>Mail Stop: TWB-01-B10M<br>Washington, DC 20555                                                                                                                                                                                                                                                                                                                                                            |                                |                                                                                                                                                                                            |  | b. STREET ADDRESS<br>Joan Lamanteer<br>Mail Stop: TWB-05-D18M    |                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                |                                                                                                                                                                                            |  | c. CITY<br>Washington                                            | d. STATE<br>DC |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                |                                                                                                                                                                                            |  | e. ZIP CODE<br>20555                                             |                |
| 7. TO:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                | f. SHIP VIA                                                                                                                                                                                |  |                                                                  |                |
| a. NAME OF CONTRACTOR<br>PAIGE INDUSTRIAL SERVICES, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                | 8. TYPE OF ORDER                                                                                                                                                                           |  |                                                                  |                |
| b. COMPANY NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                | <input type="checkbox"/> a. PURCHASE                                                                                                                                                       |  | <input checked="" type="checkbox"/> b. DELIVERY                  |                |
| c. STREET ADDRESS<br>3301 HUBBARD RD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                | REFERENCE YOUR _____<br>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. |  |                                                                  |                |
| d. CITY<br>LANDOVER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                | e. STATE<br>MD                                                                                                                                                                             |  | f. ZIP CODE<br>207852012                                         |                |
| 9. ACCOUNTING AND APPROPRIATION DATA<br>94015-5AA303 D2316 252A 31x0200 Obligate \$7,351.51<br>Transfer funds from the basic award.<br>DUNS# 013620450 FFS# N/A NAICS: 236220 PSC: Y111                                                                                                                                                                                                                                                                                                                                                     |                                | 10. REQUISITIONING OFFICE ADM<br>Office of Administration                                                                                                                                  |  |                                                                  |                |
| 11. BUSINESS CLASSIFICATION (Check appropriate box(es))<br><input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input checked="" type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> e. HUBZone<br><input type="checkbox"/> f. SERVICE-DISABLED <input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) <input type="checkbox"/> h. ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS (EDWOSB)<br><input type="checkbox"/> i. VETERAN-OWNED |                                |                                                                                                                                                                                            |  | 12. F.O.B. POINT<br>Destination                                  |                |
| 13. PLACE OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                | 14. GOVERNMENT B/L NO.                                                                                                                                                                     |  | 15. DELIVER TO F.O.B. POINT<br>ON OR BEFORE (Date)<br>03/31/2012 |                |
| a. INSPECTION<br>Rockville, MD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | b. ACCEPTANCE<br>Rockville, MD | N/A                                                                                                                                                                                        |  | 16. DISCOUNT TERMS<br>N/A                                        |                |

17. SCHEDULE (See reverse for Rejections)

| ITEM NO.<br>(a) | SUPPLIES OR SERVICES<br>(b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | QUANTITY ORDERED<br>(c) | UNIT<br>(d) | UNIT PRICE<br>(e)     | AMOUNT<br>(f) | QUANTITY ACCEPTED<br>(g) |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------|-----------------------|---------------|--------------------------|
|                 | <p>The purpose of this firm fixed price task order is to provide construction services to complete the SBCRC Conference Room Renovation Project. The contractor shall furnish all labor, materials, equipment and subcontractors needed to complete the project. All work shall be performed in accordance with the Statement of Work (attached) and Paige proposal dated September 21, 2011.</p> <p>Payment and Performance bond are not required for this project.</p> <p>All work shall begin upon award of this task order and shall be completed no later than March 31, 2012.</p> <p>Joan Lamanteer shall serve as the back-up project officer on this project. Joan's POC information is 301-492-3659 and Joan.Lamanteer@nrc.gov.</p> |                         |             | See CONTINUATION Page |               |                          |

|                                                    |                                                                                                     |  |                           |                                                                                                |                 |            |                           |
|----------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|---------------------------|------------------------------------------------------------------------------------------------|-----------------|------------|---------------------------|
| SEE BILLING INSTRUCTIONS ON REVERSE                | 18. SHIPPING POINT                                                                                  |  | 19. GROSS SHIPPING WEIGHT |                                                                                                | 20. INVOICE NO. |            | 17(h) TOTAL (Cont. pages) |
|                                                    | 21. MAIL INVOICE TO:                                                                                |  |                           |                                                                                                |                 |            |                           |
|                                                    | a. NAME<br>Department of Interior / NBC<br>NRCPayments@nbc.gov                                      |  |                           |                                                                                                |                 |            |                           |
|                                                    | b. STREET ADDRESS (or P.O. Box)<br>Attn: Fiscal Services Branch - D2770<br>7301 W. Mansfield Avenue |  |                           |                                                                                                |                 |            |                           |
|                                                    | c. CITY<br>Denver                                                                                   |  | d. STATE<br>CO            | e. ZIP CODE<br>80235-2230                                                                      |                 | \$7,351.51 | 17(i). GRAND TOTAL        |
| 22. UNITED STATES OF AMERICA<br>BY (Signature)<br> |                                                                                                     |  |                           | 23. NAME (Typed)<br>James Leedom<br>Contracting Officer<br>TITLE: CONTRACTING/ORDERING OFFICER |                 |            |                           |

TEMPLATE - ADM001

SUNSI REVIEW COMPLETE

ADM002

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**A.1 PRICE/COST SCHEDULE**

| ITEM NO. | DESCRIPTION OF SUPPLIES/SVCS                          | QTY  | UNIT | UNIT PRICE | AMOUNT     |
|----------|-------------------------------------------------------|------|------|------------|------------|
| 0001     |                                                       | 1.00 | lot  | \$7,351.51 | \$7,351.51 |
|          | SBCR Conference Room Renovation<br>- Firm Fixed Price |      |      |            |            |

|                 |            |
|-----------------|------------|
| GRAND TOTAL --- | \$7,351.51 |
|                 | =====      |

## ACCOUNTING AND APPROPRIATION DATA:

| ACRN APPROPRIATION                                  | REQUISITION NUMBER | AMOUNT |
|-----------------------------------------------------|--------------------|--------|
| 1 94015-5AA303-JCN-D2316-BOC-252A-APPNUMBER-31X0200 |                    |        |
|                                                     | ADM-11-432 P       | \$0.00 |

**A.2 NRC Acquisition Clauses - (NRCAR) 48 CFR Ch. 20****A.3 PROHIBITION OF FUNDING TO ACORN (NOV 2009)**

In accordance with section 163 of the Continuing Appropriations Resolution, 2010, Division B of Public Law No. 111-68 (CR), until further notice, no federal funds may be provided to the Association of Community Organizations for Reform Now (ACORN), or any of its affiliates, subsidiaries, or allied organizations. Additional information can be found at: [http://www.whitehouse.gov/omb/assets/memoranda\\_2010/m10-02.pdf](http://www.whitehouse.gov/omb/assets/memoranda_2010/m10-02.pdf)

**A.4 REDUCING TEXT MESSAGING WHILE DRIVING (OCT 2009)**

(a) In accordance with Section 4 of Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," (October 1, 2009), the Contractor or Recipient is encouraged to:

(1) Adopt and enforce policies that ban text messaging while driving company-owned or rented vehicles or Government-owned vehicles, or while driving privately-owned vehicles when on official Government business or when performing any work for or on behalf of the Government; and

(2) Consider new rules and programs to further the policies described in (a)(1), reevaluate existing programs to prohibit text messaging while driving, and conduct education, awareness, and other outreach programs for employees about the safety risks associated with text messaging while driving. These initiatives should encourage voluntary compliance with the text messaging policy while off duty.

(b) For purposes of complying with the Executive Order:

(1) "Texting" or "Text Messaging" means reading from or entering data into any handheld or other electronic device, including for the purpose of SMS texting, e-mailing, instant messaging, obtaining navigational information, or engaging in any other form of electronic data retrieval or electronic data communication.

(2) "Driving" means operating a motor vehicle on an active roadway with the motor running, including while temporarily stationary because of traffic, a traffic light or stop sign, or otherwise. It does not include operating a motor vehicle with or without the motor running when one has pulled over to the side of, or off, an active roadway and has halted in a location where one can safely remain stationary.

(c) The Contractor or Recipient shall encourage its subcontractor(s) or sub-recipient(s) to adopt and enforce the policies and initiatives described in this clause.

| ATTACHMENT<br>NUMBER | TITLE             | DATE | NO.<br>PAGES |
|----------------------|-------------------|------|--------------|
| 1                    | Statement of Work |      | 1            |

# **STATEMENT OF WORK (SOW)**

OWFN SBCR Third Floor  
Prepared September 8, 2011

## **Background**

This project involves removal of vinyl wall base and replace with new Johnsonite #20 Charcoal. Work to include installation of Koroguard 1/8" thick vinyl wall covering architectural material from chair rail height to the floor on all walls; include two corner guards same height on column and paint walls above wainscot in D18 conference room, within the SBCR suite. Paint shall be NRC standard off white color. Koroguard wall covering shall be Pewter (light gray). The room is 178s/f. All materials and products selected by NRC.

## **I. CONTRACT OBJECTIVES**

The contractor shall perform the construction task described herein as part of the U.S. Nuclear Regulatory Commission's (NRC) overall restoration and refurbishment activities at the NRC headquarters One White Flint North building OWFN) in Rockville, Maryland.

The contractor shall perform all construction services required to complete the refurbishment of the Press Room project that is approximately 178 square feet. The construction shall occur on the third floor. The work shall include any wall covering installation and painting, etc. to complete the project in accordance with this Statement of Work.

For this project, the NRC intends to utilize bio-based or other environmentally preferable materials if NRC determines a suitable product is readily available, cost effective and meets the performance requirements for the intended application. Where appropriate, the NRC will acquire materials that are LEED, Green Guard, Green Label Plus, Energy Star, Federal Energy Management Program (FEMP), or NSF/ANSI Standard certified materials and products.

All work under this project will be required to be performed outside the NRC's normal business day (Monday-Friday from 6:00pm until 4:00am and on weekends from 6:00am Saturday through 4:00am the following Monday), unless otherwise specified.

## **II. PROJECT OFFICER AUTHORITY**

(a) The contracting officer's authorized representative (hereinafter referred to as the project officer) for this contract is:

Project Officer:

Name: Joan Lamanteer  
Address: 11555 Rockville Pike, Rockville, MD 20852-MS TWB 5D18M  
Telephone Number: (301)492-3659  
Email Address: [joan.lamanteer@nrc.gov](mailto:joan.lamanteer@nrc.gov)

Alternate Project Officer: Eric Kim  
Address: 11555 Rockville Pike, Rockville, MD 20852-MS TWB 5D18M  
Telephone Number: (301)492-3655  
Email Address: [eric.kim@nrc.gov](mailto:eric.kim@nrc.gov)

## **II. PERIOD OF PERFORMANCE**

All work shall be completed no later than March 31, 2012.