

# Requisition

Req # 00189612

PO #

Date: 02/07/11

Bill To: x  
x

Vendor : 133655  
SUPERIOR ALARMS  
P. O. BOX 3097  
MCALLEN TX 78502  
FAX (956)971-6395

Ship To: HEALTH DEPARTMENT  
1304 S. 25TH  
EDINBURG TX 78539

Contact: JOSIE ESCALANT  
956-383-6221

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	YEAR	DO NOT DUPLICATE ORDER ANNUAL INSPECTION FEE FOR FIRE ALARM FOR: WESLACO CLIIINIC 1901 N. BRIDGE WESLACO, . TEXAS <u>Account No</u> 1-1100-441-00-340-001-0-431	275.00	275.00
			<u>Encumbrance</u>	
			275.00	
			Freight	.00
			Total	275.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: \_\_\_\_\_



600 Ash Avenue- P.O. Drawer 3097  
McAllen, TX 78501  
State Lic. B4881 - Fire Lic. ACR-86318-816  
Tel. (956) 682-6005 - Fax 213-1202

*We send the police there in a hurry!*

Inspection Program Agreement

THIS INSPECTION AGREEMENT is entered into and effective as of February 3, 2011, by and between Superior Alarms and Hidalgo County Health & Human Services.

Invoicing Address
HIDALGO COUNTY HEALTH & HUMAN SERVICES
1304 S. 25 <sup>TH</sup> ST.
EDINBURG, TX 78530
383-6221
Contact: JOSIE

Service Address
HIDALGO COUNTY HEALTH & HUMAN SERVICES
1901 N. BRIDGE
WESLACO, TX 78596
968-7541
Contact: ELVA MURPHY

**1. SERVICES INCLUDED**

- A. During the term of this Agreement, Superior Alarms shall provide inspection services on the Fire Alarm system. Inspection services shall consist of the following:
- 1) Two (2) pre-scheduled visits per year involving inspection and overall review of the system's operation. A summary report will be forwarded to Owner upon completion of each review.
  - 2) Services provided include but are limited to the following: Verify proper operation of: CPU, Control equipment, fuses, lamps, switches and batteries. Perform functional testing of: Smoke detectors (duct and area), heat detectors, manual pull stations, firefighter's telephone, relays, I/O devices, audible and visual signaling devices and auxiliary functions.
  - 3) Inspections will be conducted on a semiannual basis with 100% of system sensitivity being tested during each annual inspection. The full sensitivity test will be concluded on the fourth inspection of each year.
  - 4) Reports at the end of each inspection will be presented to the customer for resolution. Repairs requested by the Owner will be on a time and material basis plus travel time. A minimum of one hour will be billed. Repairs shall not be made without prior approval of Owner and a written Purchase Order or other means of Authorization.
  - 5) Service rates are as follows: Hourly rate per man (Scheduled). \$65.00 Hourly rates per man (Emergency, Weekend, Holiday) \$85.00

**2. SERVICE FEES**

- 2.1 Customer shall pay Superior Alarms an annual fee of \$275.00, billed annually, plus any applicable taxes, prior to inspection being provided during the initial term of this agreement. The fee may be increased for each renewal term (if any) upon thirty (30) days prior written notice to the Customer. Customer agrees to pay all fees and applicable taxes within (30) days of receipt of notice.

**3. TERMS AND TERMINATION**

- 3.1 This Agreement shall be in effect for an initial term of 36 months and will automatically renew annually unless either party provides written notice (not less than sixty (60) days prior to the expiration of the Agreement) to the other of their intention to terminate the Agreement.
- 3.2 This Agreement may be terminated upon the occurrence of any of the following events:
  - A) By Superior Alarms, if the customer fails to pay Superior Alarms all charges and applicable taxes when due.
  - B) By either party, if the other becomes insolvent or seeks protection, voluntarily or involuntarily under any bankruptcy laws.

**4. LIMITATION OF LIABILITY**

- 4.1 In no event shall Superior Alarms be liable to the customer for any indirect, special or consequential damages, lost profits or claims against Customer by any third person arising out of or relating to this Agreement or any breach thereof or the performance or non-performance of any services to be provided hereunder, even if Superior Alarms has been advised of the possibility thereof. Superior Alarms' liability to Customer hereunder, if any, shall in no event exceed the total amount paid to Superior Alarms by the Customer during the year in which the event and claim occurred.
- 4.2 Superior Alarms shall not be liable for any claims arising from the failure to provide services under this Agreement for causes beyond the reasonable control of Superior Alarms including but not limited to acts of God, acts of Customer, war, strikes, civil strife, riots, fire or flood, restrictions by law enforcement agencies, or delays in transportation or delivery of goods or services.

**5. GENERAL**

- 5.1 This Agreement shall be interpreted in accordance with the laws of the State of Texas and the parties irrevocably attain to the jurisdiction of the Courts of Texas.
- 5.2 This Agreement constitutes the entire agreement between Superior Alarms and Customer and no agreement or purchase order shall in any way add to or modify the terms hereof, unless agreed to in writing by both parties.
- 5.3 Superior Alarms will perform the inspection in accordance with the current NFPA guidelines in effect. Any discrepancy will be noted and presented to Customer for resolution.

AGREED TO:

\_\_\_\_\_  
Authorized Representative/Date

Superior Alarms, Inc.

  
\_\_\_\_\_  
Authorized Representative/Date

# Inspection Scope of Work

Primary Contact information

Phone numbers

Site Address

Salesperson

Central Station

#		Acct #		Password	
System Mfg.	Notifier	Cerbus	EST	Firelite	Other:
Type inspection	Quarterly	Semi	Annual		
Type system	Analog	Conventional			
Sensitivity test	Yes	No			
Will we be testing all or a percentage of system?			All	25%	50%
After hours testing required?		No	Yes (additional charges apply)		
Will this system require scheduling next inspection?			6 months	1 year	
Length of inspection contract.		1 year	2 year	3 year	

**Detailed list of inspection  
# devices**

Device	Yes/No
Water flow	
Tamper	
Smoke Detector	
Duct detector	
Pull Station	
Heat detector	
Pump monitoring	
Voice evac	
Audio/visual	

Other: (List in detail)

# Requisition

Req # 00189609

PO #

Date: 02/07/11

Bill To: x  
x

Vendor: 133655  
SUPERIOR ALARMS  
P. O. BOX 3097  
MCALLEN TX 78502  
FAX (956)971-6395

Ship To: HEALTH DEPARTMENT  
1304 S. 25TH  
EDINBURG TX 78539

Contact: JOSIE ESCALATN  
956-383-6221

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	YEAR	DO NOT DUPLICATE ORDER ANNUAL FEE INSPECTION SERIVE FOR: MISSION CLINIC 211 N. SCHUERBACH ROAD MISSION., TEXAS <u>Account No</u> 1-1100-441-00-340-001-0-431	275.00	275.00
			<u>Encumbrance</u>	
			275.00	
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1304 S. 25 <sup>TH</sup> ST.
EDINBURG, TX 78530
383-6221
Contact: JOSIE

Service Address
HIDALGO COUNTY HEALTH & HUMAN SERVICES
211 S. SCHUERBACK RD.
MISSION, TX 78572
585-2461
Contact: VICTORIA GARZA

## 1. SERVICES INCLUDED

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Authorized Representative/Date

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Will this system require scheduling next inspection?				6 months	1 year	
Length of inspection contract.		1 year	2 year	3 year		

**Detailed list of inspection  
# devices**

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Tamper	
Smoke Detector	
Duct detector	
Pull Station	
Heat detector	
Pump	
monitoring	
Voice evac	
Audio/visual	

Other: (List in detail)