

**STATE OF NEW HAMPSHIRE  
BUREAU OF PURCHASE AND PROPERTY  
25 CAPITOL STREET - ROOM 102  
CONCORD NEW HAMPSHIRE 03301-6398**

**DATE: January 23, 2014**

**NOTICE OF CONTRACT**

**COMMODITY:** Portable Toilets, Rental and Placement

**CONTRACT #:** 8001511

**NIGP CODE:** 971-8200

**CONTRACTOR:** C.D.S Portable Toilets                      Vendor # 151528  
PO Box 324  
Colebrook NH 03576

**CONTACT:** Brian Riff  
Phone: 603-922-8310  
Fax: 603-922-3191

**EFFECTIVE:** January 1, 2014 - November 30, 2016

**PRICING:**

<b>COOS</b>				
	<b>Delivery time</b>	1/1/2014-11/30/2014	12/1/2014-11/30/2015	12/1/2015-11/30/2016
Additional Cleanings	<b>Per Cleaning</b>	\$75.00	\$75.00	\$75.00
<b><u>PORTA POTTY, REGULAR</u></b>				
Emergency Rental Fee (per order charge)	<b>6 hours or less</b>	\$150.00	\$150.00	\$150.00
Weekly Rental Fee	<b>3 business days</b>	\$120.00	\$125.00	\$130.00
Monthly Rental Fee	<b>3 business days</b>	\$120.00	\$125.00	\$130.00
<b><u>PORTA POTTY, ADA COMPLIANT</u></b>				
Emergency Rental Fee (per order one time charge)	<b>6 hours or less</b>	\$180.00	\$180.00	\$180.00
Weekly Rental Fee	<b>3 business days</b>	\$165.00	\$170.00	\$175.00
Monthly Rental Fee	<b>3 business days</b>	\$165.00	\$170.00	\$175.00

**PAYMENTS**

Payment shall be paid in full within thirty (30) days after receipt of a properly documented invoice and acceptance of the work to the State's satisfaction. Invoices shall be submitted by agency for each individual location, or for a group of locations within the same agency. All invoices shall show the location, and the date of service.

The invoice shall be sent to the address of the using agency under this agreement.

**ORDERING:** STATE AGENCIES MAY ORDER DIRECT FROM C.D.S PORTABLE TOILETS

**DELIVERY:** FOB - DESTINATION

**FOR FURTHER INFORMATION CONTACT:**  
LAURA INGRAM, PURCHASING AGENT  
TEL (603) 271-2201 X 227      EMAIL: [LAURA.INGRAM@NH.GOV](mailto:LAURA.INGRAM@NH.GOV)