

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000294646
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Date 09/01/22
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1
			Ship To: 4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSION 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States

Vendor: 1751994983 2
DOOR CONTROL SERVICES LLC
A DH PACE COMPANY INC
321 VZ COUNTY ROAD 4500
BEN WHEELER TX 757543184
United States

Bill To: Information Services
DEPARTMENT OF STATE HEALTH SERVICES
6515 Kemp Blvd
PO Box 300
Wichita Falls TX 76308
United States

Purchaser: Mcfadden,Danny 512/406-2671

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 funding
OM/Q Phone/email bid - Texas Government Code 2156.063
Requisition 191774 - Solicitation 191774
PO Service Dates 9/1/22 to 8/31/23, Not to Exceed \$25,000

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08/31/2023 are automatically canceled.

Vendor Name: Door Control Services LLC
Vendor Address: 321 VZ County Road 4500
Vendor City Zip: Ben Wheeler, Texas 75754-3184
Vendor Contact: Craig J. Ordmandy
Vendor Contact Phone: (800) 356-2025 ext. 112
Vendor Contact Email: cordmandy@doorcontrolservices.com
Vendor TIN#: 17519949832

Contract Manager: Drew Hardy
Contract manager phone: 940-414-0975
Contract manager email: drew.hardy2@hhs.texas.gov

SME Agency Contact/Bill To: Allyson Cruz
SME Agency Contact phone #: 940-689-5351
SME Agency Contact email# allyson.cruz@hhs.texas.gov

PCS Purchaser: Danny McFadden
PCS Purchaser phone: (512) 406-2671
PCS Purchaser email: danny.mcfadden@hhs.texas.gov

SME information and billing address:
Allyson Cruz, Administrative Assistant II
allyson.cruz@hhs.texas.gov
(940) 689-5351
6515 Kemp Wichita Falls, Texas 76308

VENDORS SEND INVOICES VIA EMAIL To: DSHS.TSHBusinessOffice@dshs.texas.gov
PO BILL TO INFORMATION

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NORTH TEXAS STATE HOSPITAL
ATTN: ALLYSON CRUZ, MAINTENANCE DEPARTMENT
P.O. BOX 2231
6515 KEMP BLVD.
WICHITA FALLS, TEXAS 76301
CODE # 5616
Email#: Allyson.cruz@hhs.texas.gov

NORTH TEXAS STATE HOSPITAL WICHITA FALLS CAMPUS *****
MAIL TO INFORMATION: 5616
BUILDING: Site Wide
CONTACT: Allyson Cruz
PHONE #: 940-689-5351
FAX#: 940-689-5888
Email# allyson.cruz@hhs.texas.gov

PURPOSE:
To provide, but not limited to providing fire door inspections replacement/repair parts and service for entire campus.

Line 1 information: Services for \$11,300.00

Justification:

We use this vendor for our annual fire door inspections.

SCOPE OF WORK

***** On Site Inspection Required *****

North Texas State Hospital is requesting to establish a blanket requisition for Fire door inspections for the facility maintenance department as needed throughout the fiscal year, (including: labor, materials, equipment, apparatus, and tools) and do all things necessary to safely complete the needed services.

The following specifications are mandatory to be met for the repair contract:

Emergency repair and repair parts for the site grounds equipment.

Contractor MUST meet the following requirements:

The Fire Door Inspection Program will include the following:

Identification and confirmation of swinging type fire rated door assemblies to be inspected.

Comprehensive inspection of each identified door assembly and components.

o Visual

o Functional

DCS inspection identification labels for each door leaf.

Fire door inspection summary report.

Individual record for each fire door assembly inspected / tested

Numbered floor plan to correspond with the fire door inspection summary report.

Review of inspection results if required.

Scope of contractor services

Would include but not be limited to:

The Contractor shall provide- Fire door inspection service for maintenance as needed throughout the

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fiscal year.

The Contractor shall respond accordingly to service calls and emergency calls from North Texas State Hospital and shall perform all steps necessary to protect persons and property from risk of harm.

NORTH TEXAS STATE HOSPITAL WICHITA FALLS CAMPUS

The Contractor shall sign in at the Security Gate and the Maintenance Office upon every visit to the campus and also comply with any and all rules and safety requirements set forth by North Texas State Hospital or other Federal, state, and local laws or ordinances and permits, while on Campus.

The Contractor shall provide a trained crew that is knowledgeable and skilled, as based on this scope of work.

Service Location

Campus location is: 6515 Kemp Blvd.
Wichita Falls, TX 76301

During the contract period, North Texas State Hospital reserves the right to add or delete service locations during the period covered by any resulting contract.

Hours and Days Services are to be performed

North Texas State Hospitals Maintenance Department regular business hours are:

Monday Friday, 8 am to 5 pm

(Exception is the designated holidays recognized by the State of Texas). Should work be performed outside of normal working hours without the approval of North Texas State Hospital, then Contractor shall be performing such work at NO additional expense to North Texas State Hospital or the HHS agency.

Service Calls, Call Backs, Unperformed Service

If services/goods have not been received to a satisfactory resolution, payment will be withheld until services/goods are received and comply with this scope of work

1-1	Fy23-TPO-Door Control Services- F3E010-F2200-NTSH-WF-Retesting	910-14	1.00	LOT	11300.00000	\$11,300.00	09/01/2022
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Schedule Total \$11,300.00

This requisition is for a blanket PO This requisition is for a blanket PO.

****Please see attached template and quote ****

Item Total for Line 1 \$11,300.00

Total PO Amount \$11,300.00

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No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract.

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By



07/15/2022