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RÉQUISITIO	N DATE	-		REQUESTING DEPARTMENT/DIVISION		SUGGESTEE		IATOR	Z LW NA
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DEPARTMEN			— 4	e attached email				J	
FUNDING AF				_					
PURCHASE J	USTIFICATIO	ON:	Mas		~	4-	12-24		
SPECIAL INS	TRUCTIONS:		<u> </u>						
CONTRACT	NUMBER	REQ. DI	EL, DATE	DELIVERY POINT	SHIPPE	ng informatio	N	DEPT. VEND	OOR APPROVAL?
FOBR	DINT	TE	RMS	OVERSHIP AUTHORIZATION	CONFIRMING	F PURCHASE OF	RDER?	YES_	BUYER
				ACCOUNT NUMBER	YES	NO BID ITEM?	BID	NO.	BID DATE
SOL/TYPE FDO	VENDOR (ala	_	FUND	5305274	111/1	YES			
TTEM	QTY.		1661		ESTIMAT UNIT	NO ED COST TOTAL	CIC	ACTU	IAL COST TOTAL
NUMBER	ORDERED	UNIT	100	40 I Pads neede		TOTAL			
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REQUEST FOR QUOTE

HERNANDO COUNTY BOARD OF **COUNTY COMMISSIONERS**

THIS IS NOT **ORDER**

352-754-4020, FAX 352-754-4199 15470 Flight Path Drive **BROOKSVILLE 34604**

Date:	4/4/24				Ç	Quotatio r	No.	2272	289014		
Name:	Hernando County IT Dept			Project Name Fire Services							
Address	20 N. Ma	Street, Room 363 Requesting Department: Fire Services (ticket 57589)					57589)				
	Brooksvil	le, FL 34601									
Contact Pe	erson:	Obery Taylor	Telepho	one:	352-75	4-4009		_ Fax	<u>3</u> :	<u>52-75</u>	4-4452
Date & Ti		Return of Quote: ASA	P*Urgent* urned on ou	ır for	m or the	ey will n	ot be	ассер	ited.**	sommon nu um suestanna	
	/-	pportunity for award. See	e reverse sid	le for	Terms, (Conditio	ns app	licabl	le to any	y Ord	ers resulting
from this (1					
ITEM	QUAN.	DESCRIPTION				STOC	K NO.	N	ET PR	ICE	TOTAL
1.	40	iPad Pro 12.9 (6 th general & Sim 128GB	ation) with (Cellul	ar-Wifi			\$	1,232.5	3	\$49,301.20
8.2	40	Apple Care+ Extended years	Service Agr	eemei	nt-2			\$	107.78		\$4,311.20
		Apple ID Number 13019	35								
		80									
		QUOTE TOTAL									\$53,612.40
All Quotes	shall be FC	B Destination			Deliv	ery Date	or Sta	art of	Work:		
		entinuation sheet if necessary certified and affirmed that the	bidder will ac	cent ar	ıv awards	made to h	im as a	result	of this a	uotatio	n.
	The award	may be all or partial being in the	he best interes								
		dity is 60 days unless noted oth									
Contact Po	erson Submi	itting Quote: Kelly Ried	101								
Firm Nan	ne: Insigh	t									
Address:	2701 E Ins	ight Way	City:		ndler		S	tate:	AZ	Zip:	85286
Telephone	/Fax No: -	919-379-8548	Email:		y.riedel(.com	@ins 	ate: -	4/5/2	024		
PRINT/TY	PE NAME	Erica Falchetti		, , , , , , , , , , , , , , , , , , ,				oineanna r/marnis s anns			
TITLE: <u>I</u>	Director, Pul	olic Sector	SI	GNA.	rure:	Cica Falch	etti .	ورواند ورواند والمراوي والمراوي والمراوي والمراوي			

Form 11 Quote Form Created: 12/30/11 Revised: 10/22/16 (tg)

PURCHASE ORDER TERMS AND CONDITIONS

GENERAL

The condition of this order <u>may not</u> be changed by vendor. If order is not acceptable, return to Hernando County Purchasing and Contracts Department. Failure of a vendor to deliver according to this purchase order awarded to him or to comply with any of the terms and conditions therein may disqualify him from receiving future orders.

QUALITY

All material or services furnished on this order must be as specified and subject to County inspection and approval within a reasonable time after delivery at destination. Variations in materials or services from those specified in this order must not be made without written authority from the Chief Procurement Officer. Materials rejected will be returned at the vendor's risk and expense.

QUANTITY/PRICE

The quantity of materials ordered or the prices specified must not be exceeded without written authority being first obtained from the Chief Procurement Officer.

INDEMNITY AND INSURANCE

The vendor agrees to indemnify and hold harmless Hernando County, including its officers, agents and employees, from all claims, damages, losses and expenses, including reasonable attorneys' fees, and costs brought or incurred on account of injuries or damages sustained by any party due to the operations of the vendor under this contract. The vendor further agrees to provide workers' compensation for all employees, and to maintain such general and auto liability insurance as is deemed necessary by the County for the particular circumstances and operations of the vendor. The vendor further agrees to provide the County

PACKING

Packages must be plainly marked with shipper's name and purchase order number; charges are not allowed for boxing or crating unless previously agreed upon in writing.

DELIVERY

All materials must be shipped F. O. B. destination. The County will pay no freight or express charges, except by previous agreement. If specific purchase is negotiated on the basis of F. O. B. shipping point. VENDOR IS TO PREPAY SHIPPING CHARGES AND ADD TO INVOICE. Delivery must actually be effected within the time stated on purchase made between 8:00 AM and 5:00 PM Monday to Friday inclusive unless otherwise stated. In case of default by the vendor, Hernando County may procure the articles or services covered by this order from other sources and hold the vendor responsible for any excess occasioned thereby.

MATERIAL SAFETY DATA SHEET

The vendor agrees to furnish Hemando County with a current Material Safety Data Sheet (MSDS) on or before delivery of each and every hazardous chemical or substance purchased which is classified as toxic under Florida Statute 442. Appropriate labels and MSDSs shall be provided for all shipments. Send MSDSs and other pertinent data to: Hernando County Purchasing and Contracts Department, 20 North Main Street, Room 365, Brooksville, FL 34601-2828.

OSHA REQUIREMENT

The vendor or contractor hereby guarantees Hernando County that all materials, supplies and equipment as listed on the purchase order meet the requirements, specifications and standards as provided for under the Federal Occupations Safety and Health Administration Act of 1970, as from time to time amended and in force at the date thereof.

LEGALLY AUTHORIZED WORKFORCE

VENDOR represents and warrants that VENDOR is in compliance with all applicable federal, state and local laws, including, but not limited to, the laws related to the requirement of an employer to verify an employee's eligibility to work in the United States. VENDOR is encouraged (but not required) to incorporate the IMAGE best practices into its business and, when practicable, incorporate verification requirements into its agreements with subcontractors. The IMAGE Best Practices can be found on the COUNTY'S website at www.hernandocounty.us/pur/.

INSURANCE

Unless otherwise specified, the Contractor shall, at its sole expense, maintain in effect at all times during the performance of the services insurance coverage with limits not less than those set forth below (unless limits have been lowered) and with insurers and under forms of policies satisfactory to COUNTY.

Coverage

- (a) Worker's Compensation Employer's Liability
- (b) Commercial General Liability (County must be listed as additional Insured and must contain a Waiver of Subrogation)
- (c) Automobile Liability

Option of Split Limits: (1.) Bodily Injury

(2.) Property Damage

Minimum Amounts and Limits

Statutory requirements at location of work

\$100,000 each accident

\$100,000 by employee

\$500,000 policy limit

\$2,000,000 General Aggregate

\$2,000,000 Products-Comp. Ops Agg.

\$1,000,000 Each Occurrence

\$ 50,000 Fire Damage

\$ 5,000 Medical Expense

\$1,000,000 Combined Single Limit (owned, hired and non-owned)

\$1,000,000 Per Person or \$1,000,000 Per Accident

\$1,000,000

with Certificates of Insurance, indicating the amount of coverage in force, upon request.

Form 11 Quote Form Created: 12/30/11 Revised: 10/22/16 (tg)

REQUEST FOR QUOTE (ticket 57589) org

Final Audit Report

2024-04-05

Created:

2024-04-05

By:

Emily Thompson (emily.thompson@insight.com)

Status:

Signed

Transaction ID:

CBJCHBCAABAAkqHLsM3iEsSUFc1vCeY5dDzO91GzDoef

"REQUEST FOR QUOTE (ticket 57589) org" History

- Document created by Emily Thompson (emily.thompson@insight.com) 2024-04-05 4:52:24 PM GMT- IP address: 198.206.188.6
- Document emailed to Erica Falchetti (erica.falchetti@insight.com) for signature 2024-04-05 4:52:42 PM GMT
- Email viewed by Erica Falchetti (erica.falchetti@insight.com) 2024-04-05 4:57:12 PM GMT- IP address: 20.125.67.140
- Agreement completed. 2024-04-05 - 4:57:22 PM GMT

REQUEST FOR QUOTE

HERNANDO COUNTY BOARD OF COUNTY COMMISSIONERS

THIS IS NOT

AN

ORDER

352-754-4020, FAX 352-754-4199 15470 Flight Path Drive BROOKSVILLE 34604

Date:	4/4/24			(uotation No.	25617283	<i>i</i> .01	
Name:	Hernando	County IT Dept		P	roject Name	Fire Servi	ices	
Address	20 N. Mai	n Street, Room 363	—— Re	questing Dep	artment: Fi	re Services	(ticket	57589)
	Brooksvil	le, FL 34601						
Contact P	erson:	Obery Taylor	Telepho	ne: <u>352-75</u>	4-4009	Fax	352-75	54-4452
Date & T	ime Due for l	Return of Quote: ASA	AP*Urgent*					
	**A	all quotes have to be re	turned on ou	r form or the	ey will not be	accepted.	:*	
Illegible (Quotes risk o	pportunity for award. So	ee reverse side	e for Terms, (Conditions ap	plicable to a	any Ord	lers resulting
	Quotation.							
ITEM	QUAN.	DESCRIPTION			STOCK NO). NET P	RICE	TOTAL
1.	40	iPad Pro 12.9 (6 th gene & Sim 128GB	ration) with C	Cellular-Wifi	41540180	\$1258.	.31	\$50,332.40
3.	40	Apple Care+ Extended years	Service Agre	eement-2	41540644	\$110.9	2	\$4436.80
		- The state of the						
		Apple ID Number 1301	935					
		QUOTE TOTAL			***************************************			\$54769.20
All Quote	s shall be FC	B Destination		Deliv	ery Date or St	tart of Worl	c: 7-1	0 days for in
							stoc	ck items
Contact P	It is hereby The award	ntinuation sheet if necessary certified and affirmed that the may be all or partial being in lity is 60 days unless noted of tring Quote: Alicia Ni	the best interest therwise.			a result of this	s quotatio	on.
Contact P		ting Quote.						
Firm Nar	IIC.	onnection		200 - 200 -				
Address:	732 Milford	d Road	City:	Merrimack		State: NH	Zip	: 03054
Telephone	e/Fax No: -	800-800-0019x34351	Email:	Alicia.nicol(nnection.com	✓ I lata.	4/4/2024		
PRINT/T	YPE NAME:	Robert Bush	·					
TITLE:	Senior Direc	tor	SIC	NATURE:	Robert	t Bush		

Form 11 Quote Form Created: 12/30/11 Revised: 10/22/16 (tg) Presented to:

Hernando County

Darius McGrew - AT&T Mobility Lead

Date: 04/04/24



	Agente e gazet de l			5 50 1955	Navada i Spajan da Hiji S	
Voice & Data Access						
Rate Per User	Minutes	Messaging	Data Per User	Quantity	Total MRCs *	
\$34.99	N/A	N/A	Unlimited	40	\$1,399.96	
	Rate Per User	Rate Per User <u>Minutes</u>	<u>Rate Per Üser</u> <u>Minutes</u> <u>Messaging</u>	Rate Per User <u>Minutes</u> <u>Messaging</u> <u>Data Per User</u>	Rate Per User Minutes Messaging Data Per User Quantity	

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storage 128GB	\$999.99		40	Total OTCs * \$39,999.60
tardiner/Print/Pul. viji Philippenish Washinking 2018FF lands 47848489 Vidabak Philippen		rokaskiussiinerikerikerasur sea konnor senevat-ainmus vuokasaanaa taa 11.5 km,		tanishini - kenhalisi widi erdinasa Sabikat nidah-kenti
	Storage	Storage Unit Cost	Storage Unit Cost	Storage Unit Cost Quantity

Summary
Monthly Recurring Charges (Before Taxes & Fees)* \$1,399.96
One-time Fees \$45,959.60

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\$100,000 by employee

\$500,000 policy limit

\$2,000,000 General Aggregate

\$2,000,000 Products-Comp. Ops Agg.

\$1,000,000 Each Occurrence

\$ 50,000 Fire Damage

\$ 5,000 Medical Expense

\$1,000,000 Combined Single Limit (owned, hired and non-owned)

\$1,000,000 Per Person or \$1,000,000 Per Accident

\$1,000,000

Form 11 Quote Form Created: 12/30/11 Revised: 10/22/16 (tg)

Fran Hallet

From:

Paul Hasenmeier

Sent:

Tuesday, April 9, 2024 3:27 PM

To:

Barbara Carter-Lansaw

Cc:

Carla Rossiter-Smith; Fran Hallet; Kelly Trout

Subject:

Re: EPO for 40 iPads

Approved

Paul Hasenmeier, MPA/EFO Fire Chief / Public Safety Director Hernando County Fire Reacue 15470 Flight Path Drive Brooksville, Florida 34604 352-345-5059 www.hernandocounty.us/firerescue

On Apr 9, 2024, at 3:21 PM, Barbara Carter-Lansaw bcarterlansaw@co.hernando.fl.us wrote:

Chief,

Please reply to this email with your approval for Carla for the 40 iPads to be purchased.

Thank you,

<Outlook-Logo Desc.png> <Outlook-

nuecblbt>

Barbara Carter-Lansaw | Accounting Clerk III

Hernando County Fire Rescue

Direct: (352) 754-4829

Administration: (352) 540-4353

15470 Flight Path Drive, Brooksville, Florida, 34604

Email Address: bcarterlansaw@co.hernando.fl.us

Website	Link: https://www.he	ernandocounty.us	/firerescue
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<outlook-twit< td=""><td>tter.gif></td><td></td><td></td></outlook-twit<>	tter.gif>		

<Request for EPO for 40 iPads.pdf>

Request for Emergency Purchase Order

Hernando County Fire Rescue

Requesting Department:

Requested Vendor:	Insight							
	Three Quotes are attached.							
Purpose for EPO:								
The 40 iPads needed for the CAD run on a secure connection from an application directly to the CAD system bypassing any county network connections. This also eliminates the need for Net Mobility moving forward.								
The iPads also have the GPS antenna required for Automatic Vehicle Location service required to dispatch the closest emergency apparatus to an emergency.								
This quote includes warr	This quote includes warranty for the iPads.							
Diagram de 1001 4100	4 F20F274 CVDFD24 ČF2 C42 4	0						
_	1-5305274 CYBER24 \$53,612.4							
	If insurance does not cover the charges, we will charge to \$26,806.20 to 1661-02261-5305274							
and \$26,806.20 to 1691-02491-5305274.								
Kelly Trout		April 9, 2024						
Kelly Trout, Finance Manage	r	Date:						
Per Paul Hasenmeier, Fire Ch	Per Paul Hasenmeier, Fire Chief and Director of Public Safety							