

### Webb County Purchase Justification Form

Funding Sources Requested:	
Building Improvement Fund #605-2600-	8801
Department WEBB COUNTY SHERIFF'S OFFICE	Department Head SHERIFF MARTIN CUELLAR
Number of Dept. Employees N/A	

	Item	Qty	Qty on Hand	Condition of item being replaced: Poor/Fair/Good	Unit Price	Extended Price
HI- SCAN 6040 DS	SERIAL NO. 83400	1	1		\$4,387.00	\$4,387.00
HI-SCAN 6040DS	SERIAL NO. 83399	1	1		\$4,387.00	\$4,387.00
					-	

Total Cost of item(s) being purchased:	\$_\$8,774.00				
Do you have 3 quotes for all items listed above?	Yes No XXX				
What is the purpose of each item(s) requested? The North X-ray — machine #83399 and south X-ray machine #83400 are utilized by Court Police officers to help screen all packages, containers, bags, purses, and items from people that come to court or do business at the Webb County Justice Center. The X- ray machines help maintain our building and Judicial system safe and secure for all who visit the Justice Center.  If the purchase is to replace item(s) is the item(s) being replaced currently in use?  Yes No X Item #83400 out of order needs repairs or replaced  Yes No Item #83399 needs repairs					
What is the impact or risk potential if we don't pu Explosives being brought into our building and co occurring inside the Webb County Justice Center.					
Please Circle Priority: Critical U	pgrade Desirable				
protect valuable property; and/or comply with insurance or c PRIORITY 2: UPGRADE – Required for significant upgrade in operations.	n service, operating efficiency, economy and/or safety of current but optional new service, program, faculty or staff, or to make				
Required with this form:					
<ul> <li>Price quotes</li> <li>Pictures of item(s) to be replaced</li> <li>5 copies</li> </ul>	M. Carlay				
	Department Head Signature				

\*\*\*\* Please note this form must be filled out in its entirety for purchase to be considered for approval \*\*\*\*

## Purchase Requisition County of Webb



WEBB COUNTY SHERIFF'S OFFICE SHERIFF MARTIN CUELLAR 956-523-4500

Requisitioned By

Phone No.

Department

Req. Number

Deliver To Req. Date

WEBB COUNTY JUSTICE CENTER

## Purchase Requisition E-Mail Standard

# E-Mail Capital Outlay Requisition

I hereby certify that there is an available balance in my approved budget for the current year sufficient to pay for the item(s) requested and that the items are absolutely necessary for the discharge of my official duties.

Submitting this form from Appropriate Official's E-Mall Constitutes Signature - 自动设施市场工程等设施不平立设施设置的内容等的最近成功的共同的国际组织组织组织

NO OWE	\$4,387.00			\$4,387.00						\$8,774.00
PURPOSE	RE-NEWAL OF SERVICE AGREEMENT	FOR 2 X-RAY MACHINES LOCATED	AT THE THE WEBB COUNTY JUSTICE	CENTER.						TOTALAMOUNT
	ASAP			ASAP						
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(400)	16-938-950			16-938-950		 				
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### smuths detection

bringing technology to life

2202 Lakeside Blvd Edgewood, MD 21040 Gina Novotny FAX: 410-510-9500 Phone: 410-612-2620 Gina Novotny@smithsdetection.com

December 1, 2015

Webb County Justice Center 1110 Victoria St Laredo, TX 78042

Dear Mr. Camarillo:

As a valued customer of Smiths Detection, we want to continue to provide the service and support to keep your equipment maintained and in peak operating condition at all times. We are committed to providing the service that will ensure your investment in our products is protected.

Our records indicate that your existing On-Site Service Agreement expired on your Smiths Detection\* X-Ray equipment as of June 27,2015. As you know, your Service Agreement provides you with a cost effective solution to assure trouble-free operation of your Smiths Detection products. Service Agreements also allow you to budget one fixed expense through the Agreement period. Any unplanned corrective maintenance expense is eliminated.

Our On-Site Agreement offers the following:

### ON-SITE SERVICE AGREEMENT

- ✓ On-Site Service Coverage -- 8:00 a.m. -- 5:00 p.m., Monday -- Friday excluding holidays
- ✓ Typical Response time; within 36 hours
- ✓ Covers <u>all</u> Labor, Travel Time and Travel Expenses

- Covers all Labor, Travel Time and Travel Expenses

  Covers all Parts (X-Ray Tube/Generator Included)

  Reachback<sup>tm</sup>-ReachbackID<sup>tm</sup> 24 hour by 7 day Call Center Support

  One Annual Preventive Maintenance check. Complete operational and calibration procedure performed
- ✓ One Annual Radiation Survey
- ✓ Valued Customer Status 15% Discount on Instructor Lead Training

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According to our records, the following equipment is expiring. Included below is the price for a one-year Service Agreement.

Model Number	Serial Number	One Year - On-Site Agreement Price
HI-SCAN 6040ds	83400	\$4,387
HI-SCAN 6040ds	83399	\$4,387
Tot	\$8,774	

To initiate coverage immediately, please call me or complete the Service Agreement Acceptance Form, which follows, sign where indicated and return to my attention. I will send to you a formal Service Agreement, which must be executed and returned to us together with payment for the term desired.

Should you need additional clarification on the enclosed, or if I can provide you with any other information, including information on our various training programs for your Smiths Detection equipment, please feel free to contact me at 410.612.2620 or by email at:

<u>Gina.Novotny@smithsdetection.com</u>

Thank you and best regards,

Gina Novotny

Gina Novotny Service Sales Agent

<sup>\*</sup>Smiths Detection is a company formed through the acquisitions of Barringer Instruments and Heimann Systems

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2202 Lakeside Blvd Edgewood, MD 21040 Gina Novotny FAX: 410-510-9500 Phone: 410-612-2620

Gina.Novotny@smithsdetection.com

### Service Agreement Acceptance Form

F	Gina.Novotny@smithsdetection.com	# of Pages:	1	
Fax 4	410.510.9500	·····		
То:		From:		
Company:	Smiths Detection	ns Detection Company:		
Date:	; W.	L		
Subject:	Service Agreement	····	· · · · · · · · · · · · · · · · · · ·	
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information is as formation of the contact Name: Signature: Company:	in purchasing a Service Agreement	with Smiths De	tection, Inc. My contact	

Model Number	Serial Number	One Year - On-Site Agreement Price
HI-SCAN 6040ds	83400	\$4,387
HI-SCAN 6040ds	83399	\$4,387
Tot	al:	\$8,774

Applicable state sales tax is not included in this quote and will be added to your invoice. If you are tax-exempt, please provide an exemption certificate and sales tax will be omitted.