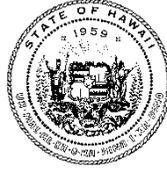


DAVID Y. IGE
GOVERNOR



SARAH ALLEN
ADMINISTRATOR
BONNIE KAHAKUI
ASSISTANT ADMINISTRATOR

**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

P.O. Box 119
Honolulu, Hawaii 96810-0119
Tel: (808) 587-4700
email: state.procurement.office@hawaii.gov
<http://spo.hawaii.gov>
Twitter: [@hawaiispo](https://twitter.com/hawaiispo)

March 4, 2020

TO: Executive Departments/Agencies Senate
 Department of Education Judiciary
 (Excludes Charter Schools) City and County of Honolulu
 Hawaii Health Systems Corporation Honolulu City Council
 Office of Hawaiian Affairs Honolulu Board of Water Supply
 University of Hawaii Honolulu Authority for Rapid Transportation
 House of Representatives

FROM: For Sarah Allen, Administrator

A handwritten signature in blue ink, appearing to read "Bonnie A. Kahakui".

SUBJECT: **Change No. 4**
 SPO Price List Contract No. 17-13
 ARMORED CAR SERVICES FOR VARIOUS STATE AGENCIES ON OAHU
 IFB-17-010-O
 Expires: March 31, 2021

The following changes have been made to the price list contract:

1. The contract is extended to March 31, 2021.
2. The contact information for Hawaii Health Systems Corporation, Honolulu City Council, and Honolulu Authority for Rapid Transportation is updated.
3. The State General Excise Tax (GET) and County Surcharge on page 3 is updated.

The current price list contract incorporating Change No. 4 is available on the SPO website: <http://spo.hawaii.gov>. Click on *Price & Vendor List Contracts* on the home page.

If you have any questions, please contact Carey Ann Sasaki at (808) 586-0575 or careyann.r.sasaki@hawaii.gov.

WHERE TO FIND:

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**STATE OF HAWAII
STATE PROCUREMENT OFFICE**

SPO Price List Contract No. 17-13

Change No. 4

Effective: 03/05/2020

THIS SPO PRICE LIST CONTRACT IS FOR AUTHORIZED BUSINESS USE ONLY.

ARMORED CAR SERVICES FOR VARIOUS STATE AGENCIES ON OAHU

(IFB-17-010-O)

April 1, 2017 to March 31, 2021

PARTICIPATING JURISDICTIONS listed below have signed a cooperative agreement and/or a memorandum of agreement with the SPO and are authorized to utilize this price list contract.

Executive Departments/Agencies	Senate
Department of Education (DOE) (Excludes Charter Schools)	Judiciary
Hawaii Health Systems Corporation (HHSC)	City and County of Honolulu (C&C Honolulu)
Office of Hawaiian Affairs (OHA)	Honolulu City Council
University of Hawaii (UH)	Honolulu Board of Water Supply
House of Representatives (House)	Honolulu Authority for Rapid Transportation (HART)

The participating jurisdictions are not required, but may purchase from this price list contract, and requests for exception from the contract are not required. Participating jurisdictions are allowed to purchase from other contractors, however, HRS chapter 103D and the procurement rules apply to purchases using the applicable procurement method and its procedures, such as small purchases or competitive sealed bidding. The decision to use this contract or to solicit pricing from other sources will be at the discretion of the participating jurisdiction.

POINTS OF CONTACT. Questions regarding the products listed, ordering, pricing, and status should be directed to the Contractor.

Procurement questions or concerns may be directed as follows:

Jurisdiction	Name	Phone	FAX	E-mail
Executive	Carey Ann Sasaki	586-0575	586-0570	careyann.r.sasaki@hawaii.gov
DOE (Excludes Charter Schools)	Procurement Staff	675-0130	675-0133	DOEProcure@notes.k12.hi.us
HHSC	Joe Evanoff	315-7449		jevanoff@hhsc.org
OHA	Phyllis Ono-Evangelista	594-1833	594-1865	phylliso@oha.org
UH	Karlee Hisashima	956-8687	956-2093	karlee@hawaii.edu
House	Brian Takeshita	586-6423	586-6401	takeshita@capitol.hawaii.gov

Jurisdiction	Name	Phone	FAX	E-mail
Senate	Carol Taniguchi	586-6720	586-6719	c.taniguchi@capitol.hawaii.gov
Judiciary	Tritia Cruz	538-5805	538-5802	tritia.l.cruz@courts.hawaii.gov
C&C of Honolulu	Procurement Specialist	768-5535	768-3299	bfspurchasing@honolulu.gov
Honolulu City Council	Kendall Amazaki, Jr. Nanette Saito	768-5084 768-5085	768-5011	kamazaki@honolulu.gov nsaito@honolulu.gov
Honolulu Board of Water Supply	Procurement Office	748-5071		fn_procurement@hbws.org
HART	David Ha	768-6294		dha@honolulu.gov

USE OF THIS PRICE LIST CONTRACT BY NONPROFIT ORGANIZATIONS. Pursuant to HRS §103D-804, nonprofit organizations with current purchase of service contracts (HRS chapter 103F) have been invited to participate in the SPO price and vendor list contracts.

A listing of these nonprofit organizations is available at the SPO website: <http://spo.hawaii.gov>. Click on *For Vendors > Non-Profits > Cooperative Purchasing Program > View the list of qualifying nonprofits eligible to participate in cooperative purchasing.*

If a nonprofit wishes to purchase from an SPO price or vendor list contract, the nonprofit must obtain approval from each Contractor (participation must be mutually agreed upon, for example). A Contractor may choose to deny participation by a nonprofit. However, if a nonprofit and Contractor mutually agree to this arrangement, it is understood that the nonprofit will retain its right to purchase from other than an SPO price list Contractor(s).

CONTRACTOR. C R Dispatch Service Inc. dba Security Armored Car and Courier Service of Hawaii is the Contractor that is authorized to provide armored car services for various state agencies on Oahu.

VENDOR CODE for annotation on purchase orders are obtainable from the *Alphabetical Vendor Edit Table* available at your department's fiscal office. Agencies are cautioned that the remittance address on an invoice may be different from the address of the vendor code annotated on the purchase order.

COMPLIANCE PURSUANT TO HRS §103D-310(c). Prior to awarding this contract, the SPO verified compliance of the Contractor named in the SPO Price List Contract No. 17-13. *No further compliance verification is required prior to issuing a contract, purchase order or pCard payment when utilizing this contract.*

UNIT PRICES include delivery to destination and all other costs except the State General Excise Tax (GET). Agencies are advised to add tax amount to their purchase order total.

STATE GENERAL EXCISE TAX (GET) AND COUNTY SURCHARGE shall not exceed the following rates if seller elects to pass on the charges to its customers.

COUNTY	COUNTY SURCHARGE TAX RATE	STATE GET	MAX PASS-ON TAX RATE	EXPIRATION DATE OF SURCHARGE TAX RATE
C&C OF HONOLULU	0.50%	4.0%	4.7120%	12/31/2030
HAWAII	0.50%	4.0%	4.7120%	12/31/2030
COUNTY OF MAUI (including Molokai and Lanai)	0.0%	4.0%	4.1666%	No county surcharge
KAUAI	0.50%	4.0%	4.7120%	12/31/2030

The GET or use tax and county surcharge may be added to the invoice as a separate line item and shall not exceed the current max pass-on tax rate(s) for each island.

County surcharges on state general excise (GE) tax or Use tax may be visibly passed on but is not required. For more information on county surcharges and the max pass-on tax rate, please visit the Department of Taxation's website at <http://tax.hawaii.gov/geninfo/countysurcharge>.

PURCHASING CARD (pCard). The State of Hawaii Purchasing Card (pCard) is required to be used by the Executive department/agencies, excluding the DOE, HHSC, OHA, and UH, for orders totaling less than \$2,500. For purchases of \$2,500 or more, agencies may use the pCard, subject to its credit limit, or issue a purchase order.

PURCHASE ORDERS may be issued for purchases of \$2,500 or more and for Contractors who either do not accept the pCard, set minimum order requirements before accepting the pCard for payment, or who charge its customers a transaction fee for the usage.

SPO PL Contract No. 17-13 will be typed on purchase orders issued against this price list contract. For pCard purchases, the SPO PL Contract No. 17-13 shall be notated on the appropriate transaction document.

PAYMENTS are to be made to the remittance address of the Contractor(s). HRS §103-10, HRS, provides that the State shall have thirty (30) calendar days after receipt of invoice or satisfactory completion of contract to make payment. Payments may also be made via pCard.

VENDOR AND PRODUCT EVALUATION. Form SPO-012, Evaluation: Vendor or Product, for the purpose of addressing concerns on this price list contract, is available to agencies at the SPO website: <http://spo.hawaii.gov>. Click on *Forms* on the home page.

PRICE LIST CONTRACT AVAILABLE ON THE INTERNET at the SPO website: <http://spo.hawaii.gov>. Click on *Price & Vendor List Contracts* on the home page.

CONTRACTOR INFORMATION

C R Dispatch Service Inc. dba Security Armored Car and Courier Service of Hawaii

Business Address:

1747 Hoe Street
Honolulu, HI 96819

Contact Person(s):

Alison R. Misajon
Phone: (808) 847-4276
Email: almisajon@securityarmoredcar.net

Fax: (808) 841-0837

Remittance Address:

P.O. Box 2073
Honolulu, HI 96805

ORDERING INSTRUCTIONS

REQUEST FOR SERVICES: Agencies shall contact the Contractor, C R Dispatch Service Inc. dba Security Armored Car and Courier Service of Hawaii (hereinafter "Contractor") directly during the contract term to set up/amend a service schedule.

Complete and submit the attached "Request for Armored Car Services" form to Contractor for each pick-up/drop-off location.

Agencies shall not request and Contractor shall not perform services outside of the contract term. Agencies shall give Contractor at least ten (10) business days notice from date of request submittal to the date to begin services. Services may start sooner than the ten (10) business days if requested by the Agency and agreeable by the Contractor.

AGENCY RESPONSIBILITY:

- *Waiting Time.* The waiting period per single location shall not exceed five (5) minutes.
- *Transport Bags.* Bags for transmittal are furnished by the agency's bank.
- *Secured and Identifiable Shipments.* Agency shall ensure that all shipments are contained in securely locked or sealed bags, envelopes, or packages prior to pick-up. Shipment shall identify where the shipment is coming from and where the shipment shall be delivered to.
- *Service Schedule.* Agency shall notify Contractor should there be any sporadic deviations from the agreed upon Service Schedule; Contractor shall notify Agency of delays due to mechanical breakdown and the length of the delay.

- *Changes in the Service Schedule.* Agency shall notify Contractor in writing of all permanent changes in agreed upon service schedule and shall give Contractor at least ten (10) business days notice prior to change taking place. If change in service schedule falls under a different price point, adjust the price as necessary.
- *Shipment Receipt Books.* Contractor shall provide shipment receipt books at the time of initial service and thereafter upon request.
- *Guard Identification.* Agency shall confirm that Guard and their ID tag/badge matches against list of authorized personnel provided by Contractor. The State has the option to refuse transfer of shipments if guards are not properly identified.

ESTIMATING YOUR MONTHLY COST FOR ARMORED CAR SERVICES:

- Determine the frequency of service per month
- Determine what area/district your pick-up and drop-off locations fall under. Area/District descriptions located on the following page.
- Calculate: Price per Day x Frequency.
- Example: My pick-up location is on Punchbowl and my drop-off location is the downtown FHB. Both Punchbowl and downtown locations are listed under the Metro area/district. The price for pick-up Metro, drop-off Metro is \$11.67 per day. I require services twice a month. Equation: \$11.67 per day x 2 pick-ups per month = estimated monthly expenditure of \$23.34.

Item No.	Pick-Up Area	Drop-Off Area	Price per Day
a	Metro	Metro	\$11.67
f	Leeward	Metro	\$11.67
m	Central	Central	\$11.67
p	Windward	Metro	\$11.67

The below listed pick-up/drop-off combinations will be done by the Contractor at no charge (\$0.00).

No.	Pick-Up Area	Drop-Off Area
b	Metro	Leeward
c	Metro	Central
d	Metro	Windward
e	Metro	North Shore
g	Leeward	Leeward
h	Leeward	Central
i	Leeward	Windward
j	Leeward	North Shore
k	Central	Metro
l	Central	Leeward
n	Central	Windward
o	Central	North Shore
q	Windward	Leeward
r	Windward	Central
s	Windward	Windward
t	Windward	North Shore
u	North Shore	Metro
v	North Shore	Leeward
w	North Shore	Central
x	North Shore	Windward
y	North Shore	North Shore

Area/District Descriptions

Metro: Hawaii Kai, Aina Haina, Kaimuki, University, Ala Moana, Downtown, Punchbowl, Kalihi, Airport

Leeward: Halawa, Aiea, Pearl City, Waipio, Waipahu, Kapolei, Ewa, Waianae

Central: Mililani, Wahiawa

Windward: Kahaluu, Kaneohe, Kailua, Waimanalo

North Shore: Hauula, Kahuku, Haleiwa

REQUEST for ARMORED CAR SERVICES

IFB-17-010-O; SPO PL Contract No. 17-13

For Agency Use	For Contractor Use
Agency hereby submits the following request for services.	Contractor hereby accepts Agency's request for services effective the Date stated, or as amended.
Submitted by: _____	Signature: _____
Phone No.: _____	Print Name: _____
Date to begin services: _____	

PICK-UP FROM:	INVOICE ADDRESS:
Department: _____	
Division/Branch: _____	
Street Address: _____	
Room/Suite: _____	
Building: _____	
City/Zip/Island: _____	
Contact Person: _____	
Phone Number: _____	

DAYS REQUESTING PICK-UP (check all that apply):

<input type="checkbox"/> Sunday	Approx. Pick-up Time: _____
<input type="checkbox"/> Monday	Approx. Pick-up Time: _____
<input type="checkbox"/> Tuesday	Approx. Pick-up Time: _____
<input type="checkbox"/> Wednesday	Approx. Pick-up Time: _____
<input type="checkbox"/> Thursday	Approx. Pick-up Time: _____
<input type="checkbox"/> Friday	Approx. Pick-up Time: _____
<input type="checkbox"/> Saturday	Approx. Pick-up Time: _____
<input type="checkbox"/> Holidays	Approx. Pick-up Time: _____
<input type="checkbox"/> Agency will contact vendor for furlough day/holiday pick up	
<input type="checkbox"/> Other (specify): _____	

Special Instructions: _____

FOR WHICH DAY DELIVERY:

<input type="checkbox"/> Same Day Delivery	Deliver-by Time: _____
<input type="checkbox"/> Next Day Delivery	Deliver-by Time: _____
<input type="checkbox"/> Next day only if too late for same day delivery	Deliver-by Time: _____
<input type="checkbox"/> Other (specify): _____	Deliver-by Time: _____

DELIVER TO:

Bank: _____

Location/Branch: _____

Other (specify): _____

location: _____

street: _____

room/suite: _____

city/zip/island: _____

contact person (if applicable): _____

phone number (if applicable): _____

TYPES OF ITEMS:

Types of items to be delivered: _____

Agency - Submit completed form to Contractor. Contractor - Once request approved/accepted, sign. Copy to agency.