

Fort Bend County Tabulation
Bid 16-098
Term Contract for Contingency Aedes Vector Control Services

Recommendation: Primary = Pest Management and Secondary = Gillen Pest Control

Funding: HHS

Priced per Lot Size

Description	Lot Size A 1 - 4,999 sqft	Lot Size B 5,000 - 9,999 sqft	Lot Size C 10,000 - 14,999 sqft	Lot Size D 15,000 - 19,999 sqft
Pest Management Inc.	\$65.00	\$105.00	\$155.00	\$210.00
Gillen Pest Control Inc.	\$85.00	\$125.00	\$165.00	\$205.00
Clarke Environmental Mosquito Management Inc.	Disqualified: Did not provide pricing as required.			

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2016-91139

Date Filed:
07/27/2016

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Pest Management Inc.
Austin, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

B16-098
Contingency Aedes Vector Control Services

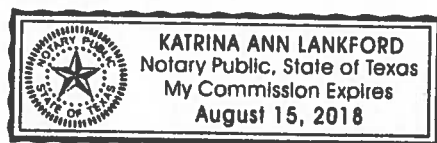
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Sarah McElwee
Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sarah McElwee, this the 27 day of July, 2016, to certify which, witness my hand and seal of office.

Katrina Lankford Katrina Lankford notary official
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2016-80716

Date Filed:
07/06/2016

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Gillen Pest Control, Inc.
Richmond, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

B16-098
contingency Aedes Vector Control Services

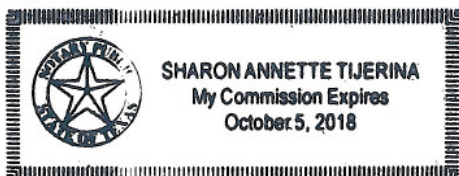
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



AFFIX NOTARY STAMP / SEAL ABOVE

Janice Gillen
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Janice Gillen, this the 7 day of July, 2016, to certify which, witness my hand and seal of office.

Sharon Tijerina
Signature of officer administering oath

Sharon Tijerina
Printed name of officer administering oath

Notary Public
Title of officer administering oath