



Fairchild Volunteer Fire Department

8715 Fairchilds Rd.

Richmond, Texas 77469

979-793-6676

To Whom It May Concern:

Fairchild Volunteer Fire Department is seeking the donation of the following items, which have been removed from active service from the Fort Bend County Sheriff's Office and placed at the purchasing office in Needville to go to auction.

<u>QTY</u>	<u>Item</u>	<u>Unit Number</u>	<u>S/N</u>
1	Firefighter End Table	N/A	N/A
1	Ice Berg Plastic Storage Cabinet	N/A	N/A
1	Red Office Chair	N/A	N/A
2	Chevy Tahoe Storage Cabinets	N/A	N/A
1	Cummins Genset Generator	N/A	K090051465
1	Cummins Genset Generator	N/A	E130506158
1	Cummins Genset Generator	N/A	J100161413
1	Cummins Genset Generator	N/A	C080162584

We understand there are no implied warranties for this equipment through the Fort Bend Co. Sheriff's Office and we accept this equipment in "As-Is Condition"

Thank you for your consideration of our request. I look forward to hearing from you.

Sincerely,

/s/ Joshua D. Shed

Fairchild VFD Fire Chief
Direct Line: 832-535-7062

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**

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

Fairchild Volunteer Fire Department
 Richmond, TX United States

Certificate Number:
 2018-429844

Date Filed:
 12/02/2018

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

Date Acknowledged:
 12/11/2018

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.

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 County surplus items: 4 generators, 1 office chair, one firefighter end table, 1 grey plastic storage cabinet, 2 Chevy Tahoe storage boxes.

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 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

 Signature of authorized agent of contracting business entity
 (Declarant)