

COPY

Division of Purchase and Contract
Administration Building, 4th Floor
116 W. Jones St.
Raleigh, NC 27603

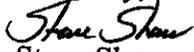
To Whom It May Concern:

Dodson Pest Control has been in business for 65 years and has become one of the largest regional pest control companies in the country.

Dodson covers a five state area with 34 district offices. Dodson's director of technical services is Dr. Eric Smith. Dr Smith wrote the field guide for the National Pest Management Association that companies around the country use as a reference. Dodson provides pest control services utilizing its own employees. The technicians go through training provided by the state and Dr. Smith and are registered technicians and certified by the state.

We would like to thank you for the opportunity to submit a proposal and hope you find the information in order.

Sincerely,



Steve Shaw

Dodson Pest Control
Commercial Accounts Executive

Solicitation (IFB, RFP, RFQ) No. 200900914

Bidder/Offeror: Dodson Pest Control

**THIS PAGE IS TO BE FILLED OUT AND RETURNED WITH YOUR BID. FAILURE TO DO SO
MAY SUBJECT YOUR BID TO REJECTION.**

ATTENTION

Federal Employer Identification Number or alternate identification number
(e.g., Social Security Number) is used for internal processing, including bid tabulation.

Enter ID number here: 54-0624996

Pursuant to N.C.G.S. 132-1.10(b) this identification number shall not be released to the public.

This page will be removed and shredded, or otherwise kept confidential,
before the procurement file is made available for public inspection.

COST PROPOSAL/EXECUTION OF PROPOSAL

By submitting this proposal, the potential contractor certifies the following:

- This proposal is signed by an authorized representative of the firm.
- It can obtain insurance certificates as required within 10 calendar days after notice of award.
- The cost and availability of all equipment, materials, and supplies associated with performing the services described herein have been determined and included in the proposed cost.
- All labor costs, direct and indirect, have been determined and included in the proposed cost.
- The potential contractor has read and understands the conditions set forth in this RFP and agrees to them with no exceptions.
- The offeror is registered in NC E-Procurement @ Your Service or agrees to register within two days after notification of contract award.

Therefore, in compliance with this Request for Proposals, and subject to all conditions herein, the undersigned offers and agrees, if this proposal is accepted within 30 days from the date of the opening, to furnish the subject services for a cost not to exceed \$ 195.00 monthly.

OFFEROR: Dodson Pest Control
 ADDRESS: 6407 Idlewild Rd. Ste. 1-108
 CITY, STATE, ZIP CODE: Charlotte NC 28212
 TELEPHONE NUMBER: 704-563-0037 FAX: 704-451-8154
 E-MAIL: Steve.Shaw@dodsonbies.com

Principal Place of Business if different from above (See General Information on Submitting Proposals, Item 18.):

3712 Campbell Ave. Lynchburg, Va. 24501-41504

Will any of the work under this contract be performed outside the United States? Yes No
(If yes, describe in technical proposal.)

N.C.G.S. § 133-32 and Executive Order 24 prohibit the offer to, or acceptance by, any State Employee of any gift from anyone with a contract with the State, or from any person seeking to do business with the State. By execution of any response in this procurement, you attest, for your entire organization and its employees or agents, that you are not aware that any such gift has been offered, accepted, or promised by any employees of your organization.

BY: [Signature] TITLE: Commercial Accounts Executive DATE: 11-2-09
 (Signature)
Steve Shaw
 (Printed name)

ACCEPTANCE OF PROPOSAL

(Using Agency Name)

BY: [Signature] TITLE: Purchasing Agent DATE: 12/10/09
Angela Wainright

THIS PAGE MUST BE SIGNED AND INCLUDED IN YOUR PROPOSAL.

Unsigned proposals will not be considered.

In accordance with NC General Statute 143-59.4 (Session Law 2005-169), this form is to be completed and submitted with the offeror's (technical) proposal/bid.

Issuing Agency: Department of Administration Solicitation #200900914
Agency Contact Person & phone #: Mildred C. Christmas, (919) 807-4525

Solicitation Title / Type of Services: Pest and Rodent Control Service

OFFEROR: Dodson Pest Control
City & State: Charlotte, NC 28212

Location(s) from which services will be performed by the contractor:

Service	City/Providence/State	Country
<u>Pest and Rodent Control</u>	<u>Charlotte NC</u>	<u>USA</u>
_____	_____	_____
_____	_____	_____

Location(s) from which services are anticipated to be performed outside the U.S. by the contractor:

<u>N/A</u>	_____	_____
_____	_____	_____

Location(s) from which services will be performed by subcontractor(s):

Service	Subcontractor	City/Providence/State	Country
<u>N/A</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Location(s) from which services are anticipated to be performed outside the U.S. by the subcontractor(s):

<u>N/A</u>	_____	_____	_____
_____	_____	_____	_____

(Attach additional pages if necessary.)

REFERENCES

City of Charlotte
531 Spratt St.
Charlotte, NC 28206
Sue Rutledge – 704-336-4120

Meca Properties
1815 S. Tryon St. Ste. D
Charlotte, NC 28203
Amber Parnell – 704-971-6511

GEM Management
2021 Cross Beam Dr.
Charlotte, NC 28217
Debbie Honeycutt – 704-357-6000

2010

NORTH CAROLINA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES

STEVE TROXLER, COMMISSIONER

LICENSE / CERTIFICATE

By Authority of the Structural Pest Control Committee

NOT TRANSFERABLE
STATUTE GS 81, 106, 119

LICENSE/CERTIFICATE Structural Pest Control Licensee

EXPIRATION DATE 06/30/2010

Phases: PWF

LICENSEE KERLEY, JAMES C

OR DODSON BROS EXT CO INC

CERTIFICATOR 4110 THE PLAZA

CHARLOTTE

NC 28205



LICENSE/CERTIFICATE NO.
1367PWF

THIS LICENSE/CERTIFICATE MAY BE SUBJECT TO REVOCATION OR SUSPENSION AS PROVIDED BY LAW.

Steve M. Troxler
STEVE TROXLER, COMMISSIONER

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/10/08

PRODUCER
1-800-326-6203
Arthur J. Gallagher Risk Management Services, Inc.
14241 Dallas Parkway
Suite 300
Dallas, TX 75254

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
DODSON BROS. EXTERMINATING CO.
3712 CAMPBELL AVENUE
LYNCHBURG, VA 24506

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Old Republic Ins Co	24147
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENTL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO.JECT <input type="checkbox"/> LOC	NWZY 58065	01/01/09	01/01/10	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED. EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY <input type="checkbox"/> ANY AUTO EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	NWZB 20276	01/01/09	01/01/10	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	NWZC 1000000	01/01/09	01/01/10	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$2,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 ALL LOCATIONS AND OPERATIONS

CERTIFICATE HOLDER

THIS IS A SPECIMEN FOR BID PURPOSES ONLY

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Robert C. Caplan

ACORD 25 (2001/08) superseded
10514797

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IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.