

Goods Lines								
Line Number	Item Name	Supplier Item Identifier	Description	Due Date	Unit of Measure	Quantity	Unit Price	Line Amount
1			Exhibit D F550 Patrol Unit, (includes equipment) Includes delivery to customer location Per attached component list Delivery is approximately 22.0 to 24.0 Months	12/01/2026	Each	1	\$589,469.50	\$589,469.50
2024 Capital replacement for Z-F-042								
2			Exhibit A Oshkosh Striker 8x8 RT Includes delivery to customer location Per attached specification Delivery is approximately 17.0 to 21.0 Months	12/01/2026	Each	1	\$2,825,722.08	\$2,825,722.08
2024 Capital replacement for Z-F-32								

Goods Lines								
Line Number	Item Name	Supplier Item Identifier	Description	Due Date	Unit of Measure	Quantity	Unit Price	Line Amount
3			Exhibit B Oshkosh Striker 8x8 RT Includes delivery to customer location Per attached specification Delivery is approximately 17.0 to 21.0 Months  2025 capital replacement for Z-F-033, Z-F-034	12/01/2026	Each	2	\$2,825,722.08	\$5,651,444.16
4			Exhibit C F550 Patrol Unit, (includes equipment) Includes delivery to customer location Per attached component list Delivery is approximately 22.0 to 24.0 Months  2025 Capital replacement for Z-F-043	12/01/2026	Each	1	\$589,469.50	\$589,469.50

10/26/2025 Change Order LR. Increase lines 2&3, New PO total \$9,656,105.26

3.26(e)-This Purchase Order is contingent on Council approval and is void without such action.

Sales Quotes attached Exhibits A,B,C & D

Shipping: Purchase Order price listed herein includes all shipping and handling. F.O.B. DENVER INTERNATIONAL AIRPORT FLEET, 27500 E 80th Ave, Unit A, Denver, CO. 80249

Payment: Term: Net 30 Upon inspection and acceptance.

Purchase Order has been issued in accordance with DRMC 20-64.5 of the Revised Municipal Code: Cooperative Purchasing and is supported by HGAC CONTRACT AWARDED, CONTRACT NUMBER FS12-23

The terms and conditions of this purchase order shall supersede and replace the HGAC CONTRACT AWARDED, CONTRACT NUMBER FS12-23

All Titles to Read:

City and County of Denver  
201 West Colfax Avenue Dept. 304  
Denver, CO 80202

Contact person for delivery and other questions is Matthew McKibbin at 303-342-2891 or [matthew.mckibbin@flydenver.com](mailto:matthew.mckibbin@flydenver.com)

Vendor to fill in and submit Vehicle Check-In Sheet. See Exhibit E  
Delivery will NOT be considered complete without it.

Delivery: Monday through Friday between 8:00am and 4:00pm. Location:  
DENVER INTERNATIONAL AIRPORT FLEET  
27500 E 80th Ave, Unit A  
Denver, CO 80249

Upon service completion and/or delivery of goods, please reference Purchase Order (PO) number. Please send/copy invoices to [accounts.payable@flydenver.com](mailto:accounts.payable@flydenver.com). All billing inquiries are to be directed to the billing agency contact listed above.

CHANGES TO THIS PURCHASE ARE NOT VALID WITHOUT PRIOR APPROVAL FROM PURCHASING.

\* Supplier Contact Name, Phone, Email:  
Duane Doucette, 303-449-9911, [DuaneD@frontrangefire.com](mailto:DuaneD@frontrangefire.com)

Michael  
Romero

Digitally signed by  
Michael Romero

Authorized By

By accepting this Purchase Order you agree to the Terms and Conditions of the General Services Purchasing Division.  
Follow the URL provided to the Purchase Order Terms and Conditions –  
<https://denvergov.org/Government/Agencies-Departments-Offices/Agencies-Departments-Offices-Directory/General-Services/Purchasing-Division/Terms-and-Conditions>

# PURCHASING CHANGE ORDER FORM



Purchase Order:

PO-00165256

Date of Request

10/22/2025

Supplier:

FRONT RANGE FIRE APPARATUS

Buyer:

LEANN RUSH

## Change Order Summary

Line Total Amount

(current overall PO amount)

\$ 9,615,640.00

Total Amount Requested Change

\$ 40,465.26

NEW TOTAL P.O. AMOUNT:

\$ 9,656,105.26

Supplier Contract:

NA

## Requesting Agency Details

Name of Agency Requestor

MATTHEW MCKIBBIN

E-mail of Agency Requestor

[MATTHEW.MCKIBBIN@FLYDENVER.COM](mailto:MATTHEW.MCKIBBIN@FLYDENVER.COM)

Other Approver (if required)

BMO Approver (if required)

*I hereby certify that the above information is correct and there is sufficient budget to process this transaction.*

Cost Center Approver (Printed Name and Signature)

### Requested Changes to P.O. Lines

Line #

2

Start Date

End Date

(Leave dates blank if there are no changes)

Amount Ordered (Current)

\$ 2,812,233.66

Requested Change Amount

\$ 13,488.42

Total New Line Amount

\$ 2,825,722.08

Explanation of Requested Changes:

MULTIPLE ADDITIONS AND DELETIONS OF THE TRUCK SPEC. THE ADDITIONS REQUESTED BY DFD AND APPROVED BY FLEET RESULTS IN AN INCREASE OF \$13488.42

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY

COST CENTER

FUND

GRANT (if applicable)

PROGRAM CODE

PROJECT NUMBER (PRJ #)

CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)

ADDITIONAL WORKTAGS

Line #

3

Start Date

End Date

(Leave dates blank if there are no changes)

Amount Ordered (Current)

\$ 5,624,467.34

Requested Change Amount

\$ 26,976.84

Total New Line Amount

\$ 5,651,444.18

Explanation of Requested Changes:

MULTIPLE ADDITIONS AND DELETIONS OF THE TRUCK SPEC. THE ADDITIONS REQUESTED BY DFD AND APPROVED BY FLEET RESULTS IN AN INCREASE OF \$13488.42 PER TRUCK FOR A NEW LINE TOTAL OF \$26976.84

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY

COST CENTER

FUND

GRANT (if applicable)

PROGRAM CODE

PROJECT NUMBER (PRJ #)

CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)

ADDITIONAL WORKTAGS

Line #

Start Date

End Date

(Leave dates blank if there are no changes)

Amount Ordered (Current)

\$ -

Requested Change Amount

Total New Line Amount

\$ -

Explanation of Requested Changes:

Per AP Please have provide separate lines on the PO for each invoice. jc - 11/18 QJ

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY

COST CENTER

FUND

GRANT (if applicable)

PROGRAM CODE

PROJECT NUMBER (PRJ #)

CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)

ADDITIONAL WORKTAGS

Line #	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

Explanation of Requested Changes:

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

Line #	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

Explanation of Requested Changes:

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

Line #	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

Explanation of Requested Changes:

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

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Line #	Start Date	End Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	<b>\$</b> <input type="text" value="-"/>

Explanation of Requested Changes:

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

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Line #	Start Date	End Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	<b>\$</b> <input type="text" value="-"/>

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

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Line #	Start Date	End Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	(Leave dates blank if there are no changes)

Amount Ordered (Current)	Requested Change Amount	Total New Line Amount
<input type="text"/>	<input type="text"/>	<b>\$</b> <input type="text" value="-"/>

Explanation of Requested Changes:

Leave the Worktag fields below blank if there are no changes to funding sources

SPEND CATEGORY	COST CENTER	FUND	GRANT (if applicable)	PROGRAM CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROJECT NUMBER (PRJ #)	CAPITAL PROGRAM (EX: GK070 - ADA IMPROVEMENTS)	ADDITIONAL WORKTAGS		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

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## ADDITIONS / DELETIONS CHANGE ORDER FORM



<b>CUSTOMER:</b> Denver International Airport	<b>JOB NO:</b> 42985	<b>DESCRIPTION:</b> Oshkosh 8x8 ARFF (3-Units)	<b>Purchase Order #</b> PO-0016526
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#	DATE	ADDITION / DELETION DESCRIPTION	PRICE
1	9/16/25	ADD - Acc., Chassis, Fuel Filter Enclosure, 8x8	\$1,020.44
2	9/16/25	ADD - Paint Nitrogen Cylinder Color, Purple	\$786.66
2	9/16/25	ADD - Paint Argon Cylinder Color, White	\$786.66
3	9/16/25	DELETE - Reel, Electric, 200' (60m) x .5" (12mm) 12/3-20A Cord, Top Mtd, w/Tilt Tray	(\$4,847.62)
4	9/16/25	ADD - Reel, Electric, 200' (60m) x .5" (12mm) 12/3-20A Cord, Top Mtd, w/Tilt Tool Tray	\$6,845.20
6	9/16/25	DELETE - Power Strip, EMS Compartment, RH Rear Shoreline Power	(\$1,049.86)
7	9/16/25	ADD - Power Strip, (1) EMS Compartment & (1) LH Upper, RH Rear Shoreline Power	\$2,007.47
8	9/16/25	ADD - Acc., Preconnect Compartment, (2) Tilt Trays, 8x8	\$6,892.14
9	9/16/25	ADD - Large Access Panel above engine in place of smaller separate ones with quick release fasteners	\$877.33
10	9/16/25	ADD - Aux. Equipment, Propellant Cylinder Service Wrenches. Denver	\$170.00
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22			

<b>PER UNIT ADDITIONS / DELETIONS SUB TOTAL:</b>	<b>\$13,488.42</b>
<b>Number of Units</b>	<b>3</b>
<b>Total Change Price:</b>	<b>\$40,465.26</b>

<b>APPROVAL SIGNATURE:</b>	<b>DATE:</b>
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