



STATE OF IOWA
MASTER AGREEMENT
 Contract Declaration and Execution

MA 005

20297E

EFFECTIVE BEGIN DATE: 04-08-2025
EXPIRATION DATE: 04-07-2026
PAGE: 1 of 3

VENDOR:

Waste Solutions of Iowa

00003119396

PO Box 938
Des Moines, IA 50304-0938

VENDOR CONTACT:

Becky Peltzer

PHONE: 515-288-0924

EMAIL: becky@wastesolutionsofiowa.com

FOB: FOB Dest, Freight Prepaid

ISSUER:

Randy Bennett

EXT: PHONE: 515-322-1210

EMAIL: Randy.Bennett@iowa.gov

Contract For: Portable Toilet Rentals for Emergencies

The parties agree to comply with the terms and conditions on the following attachments which are by this reference made a part of the Agreement.

Attachments are on file with the Department of Administrative Services - Central Procurement.

Attachment 1: Competitive Solicitation RFB0520005262

Attachment 2: Contractor's Response to Solicitation Criteria RFB0520005262 (except for any contractor objection or amendment to the Competitive Solicitation Document requirements that the State has not explicitly agreed to in writing)

Attachment 3: Bid Tabulation to competitive solicitation RFB0520005262.

For ordering contact the Vendor located in the header.

RENEWAL OPTIONS

AUTHORIZED DEPARTMENT

ALL

SUB Other Governmental Entities



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LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
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1	0.00000	EA	97773	\$ 75.000000
				\$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Toilets, Portable, Rental or Lease

Toilets, Portable, Rental

Per day

Any service would be an additional \$30.00. Only services the Des Moines area and surrounding areas up to a 50 mile radius.



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TERMS AND CONDITIONS

Services Effective 1 May 16

The parties agree to comply with the terms and conditions on the following web site which are by this reference made a part of the Agreement. General Terms and Conditions for service contracts are posted at: <https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20services.pdf>

THIS MASTER AGREEMENT IS EFFECTIVE AS OF THE LATEST DATE SHOWN IN “EFFECTIVE BEGIN DATE” IN THE UPPER RIGHT HAND CORNER OR THE DATE BELOW SIGNED BY THE STATE OF IOWA.

CONTRACTOR		STATE OF IOWA	
CONTRACTOR'S NAME (If other than an individual, state whether a corp, partnership, etc.		AGENCY NAME	
BY (Authorized Signature)  <small>Rebecca Peltzer (Dec 16, 2024 22:53 EST)</small>	Date Signed 12/16/24	BY (Authorized Signature)  <small>Randy Bennett (Dec 17, 2024 08:25 CST)</small>	Date Signed
Printed Name and Title of Person Signing Rebecca Peltzer		Printed Name and Title of Person Signing Randy Bennett - Purchasing Agent	
Address 5554 NE 14th Street, Des Moines, IA 50313		Address Hoover Bldg., 3rd Floor, 1305 E. Walnut St., Des Moines, Iowa 50319	