REQUEST FOR AGENDA PLACEMENT FORM

Submission Deadline - Tuesday, 12:00 PM before Court Dates

SUBMITTED BY: Sheriff Adam King TODAY'S DATE: July 16, 2021

DEPARTMENT: Johnson County Sheriff's Office - Jail

REQUESTED AGENDA DATE: July 26,	
SPECIFIC AGENDA WORDING: Consideration to Approve Proposal be	tween Mid-Cities Pest Control and Johnson
County.	COMMISSIONERS COURT
	JUL 2 6 2021
	Approve
PERSON(S) TO PRESENT ITEM: Sheriff Adam King & Captain David Is SUPPORT MATERIAL: (Must enclose su	
TIME: 5	ACTION ITEM:
(Anticipated number of minutes needed to discuss item)	
(Anticipated number of infinites needed to discuss item)	WORKSHOP:
(Anticipated number of minutes needed to discuss item)	WORKSHOP: CONSENT: EXECUTIVE:
	CONSENT:
STAFF NOTICE:	CONSENT: EXECUTIVE:
	CONSENT:
STAFF NOTICE: COUNTY ATTORNEY:	CONSENT: EXECUTIVE: IT DEPARTMENT:
STAFF NOTICE: COUNTY ATTORNEY: AUDITOR:	CONSENT: EXECUTIVE: IT DEPARTMENT: PURCHASING DEPARTMENT:
STAFF NOTICE: COUNTY ATTORNEY: AUDITOR: PERSONNEL: BUDGET COORDINATOR:	CONSENT: EXECUTIVE: IT DEPARTMENT: PURCHASING DEPARTMENT: PUBLIC WORKS:
STAFF NOTICE: COUNTY ATTORNEY: AUDITOR: PERSONNEL: BUDGET COORDINATOR:	CONSENT: EXECUTIVE: IT DEPARTMENT: PURCHASING DEPARTMENT: PUBLIC WORKS: OTHER:
STAFF NOTICE: COUNTY ATTORNEY: AUDITOR: PERSONNEL: BUDGET COORDINATOR: This Section to be co	CONSENT: EXECUTIVE: IT DEPARTMENT: PURCHASING DEPARTMENT: PUBLIC WORKS: OTHER: ompleted by County Judge's Office



www.thebugdude.com

Date: 07	7/13/202
----------	----------

Technician:

PROPOSAL FOR WORK OR SERVICES

		This Proposal is Submitted to Johnson County					
	This Proposal is Submitted to Johnson County		noon county	Phone			
		Address to be Serviced 1800 Ridgemar Dr		Cleburne TX			
				City	State		
		Billing Address 1800 Ridgemar Dr		Cleburne	TX		
				City	State		
# 1 # 2 # 3 # 3 # 3 # 3 # 3 # 3 # 3 # 3 # 3		Persons to be Contacted Kristen Lesley		817-202-4000 x3602			
		REGULAR MAINTENANCE PLANS		Phone ONE TIME SERVICES			
		[X] *MONTHLY	\$ 145.00	[] ORGANIC PEST CONTROL	\$		
		[] *EVERY OTHER MONTH	\$	[] F&B Y: RD/BACK/FRONT	\$		
		[]*QUARTERLY	\$	[] FLEA TREAT MENT-IN/OUT	\$		
		[] *GENERAL ANNUAL PLAN	\$	[] PERIMETER/EA' ES SPRAY	\$		
		[] ANNUAL PLAN	\$	[] TREE SPRAY	\$		
		[] F: P-FIRE ANT PROGRAM	\$	[] GENERAL SPRAY	\$		
		*General Pest Coverage Only	*		*		
[] AT TIC/CRAWL SP: CE DUST	e						
[] RODENT BAITING	\$						
[] RODENT BOX/MOUSE BOX	\$						
[]TRAPPING	\$						
[] GERMAN ROACH TRTMNT	\$						
[] ANT TREAT MENT	\$						
[] OTHER	\$						
	Φ	PESTS CO	/EDED				
X GENERAL PESTS - roaches	sniders cric			X AN	TO (Chack of that annul		
X GENERAL PESTS - roaches, spiders, crickets, earwigs, centipedes/millipedes, fire ants X RODENTS - rats & mice X ANTS (Check all that ap, IX) ACROBAT ANTS							
GERMAN ROACHES				[X] ARGENTINE ANTS			
FLEAS/TICKS				[X] CARPENTER ANTS [X] CRAZY ANTS			
FIRE ANTS - INTERIOR, PERIMETER, Y: RD			[X] FIRE ANTS				
W SPS/BEES STORED PRODUCT PESTS - weevils, Indian meal moths, etc.				E BLACK ANTS ROUS HOUSE ANTS			
SPRINGT: ILS					R.OH .NTS		
[]OTHER_				<u>X</u> .LL	.NTS LISTED .BONE		
		LETTER DENOTES	COVERAGE				
		ANNUAL COVERAGE GEN. ANN. COVERAGE	(C) (D)	OFMED 41 001/ED 40E			
		ADDITIONAL INF	ORMA' ION				
Proposal for services to be perfor \$145.00 + \$4 Trip Charge - Alterr Interior: Jan, Mar, May, July, Sept	ating mor	September 1st, 2021: hths for Interior and Exterior Servi	ce				
Exterior: Feb, Apr, Jun, Aug, Oct,							
Payment and applicable tax is to be made at time service is rendered by: [] Cash [] Check [] Credit Card ACCEPT NCE OF PROPOS 1L							
The above prices, description of services to be performed are satisfactory and are hereby accepted. You are authorized to do the work as specified.							
Payment will Pe made as outline d shovs.							
ccepted Date 743421 7-2Le-21							
	_						

MID1218P22