

070902060000  
(SED CODE)

The State Education Department  
Transportation Unit, Room 876 EBA  
Albany, New York 12234

K-3

C  
Contract Number  
(SED will fill in)

**TRANSPORTATION CONTRACT**

(Do not use for Addendums or Extensions - See Note on Reverse)

Debra L. Palmer Contact Person		607 734-1114 Tel	607 734-7134 Fax
Elmira Heights CSD School District/BOCES			
2083 College Ave Street or P.O. Box			
Elmira Heights, NY	NY	14903	
City	State	Zip Code	

Check if applicable:

- Special Education Pupils - Transportation required as a related service.
  - Contract will begin part way through the school year and cost \$20,000 or less.
  - One-month emergency contract -31 Calendar Days.
  - Contract for bus maintenance only.
  - District will supply contractor with fuel.
- Specifications include:
- Provision for attendants, escorts or monitors.
  - Clause for increasing or decreasing service.

This AGREEMENT made this August day of 2012 by and between  
Elmira Heights CSD, County of Chemung, N.Y.  
 party of the first part and Horseheads CSD, party of the second part.  
 (Name of School District or BOCES) (Contractor)

WITNESSETH. That whereas party of the first part is duly empowered (by the provisions of Section 1604, 1709, 2021, 2503, 4401 and 4402 of the Education Law) to enter into a contract for the purpose of providing transportation for children of said district for the period of service to begin  
09 / 05 / 2012 and to end 06 / 21 / 2013  
 Month Day Year Month Day Year

NOW, THEREFORE, the said party of the first part hereby agrees to pay to the said party of the second part the sum of \$ 42,000.00 or \$ \_\_\_\_\_ if on a per-bus, per-diem, per-mile or other unit cost basis for providing such transportation on a suitable conveyance.  
 (If lump sum contract) (Unit Cost)

Total Anticipated Annual Cost \$ 42,000.00.

If awarded through a request for proposals, date of request of such proposals \_\_\_\_\_ (see note on reverse)

IN WITNESS WHEREOF, The parties have set their hands the day and year above written.

\_\_\_\_\_  
 (Signature of Trustee or President of Board of Education) Elmira Heights CSD, 2083 College Ave, Elmira, NY  
 (Party of the First Part) (Post Office Address)

\_\_\_\_\_  
 (Signature of Contractor) Horseheads CSD, Rauder Lane, Horseheads, NY  
 (Party of the Second Part) (Post Office Address)

**COMPLIANCE CERTIFICATION.** I certify that this contract was awarded in accordance with the competitive bidding provisions of Section 103 of the General Municipal Law, Section 305 (14) of the Education Law, and Section 156.1(b) of Commissioner of Education Regulations, or in accordance with the request for proposals provisions of Section 305(14) of the Education law and Section 156.12 of Commissioner of Education Regulations. I also certify that this contract has been authorized by the voters in accordance with Section 1709(27) of the Education Law, and has been approved by the Superintendent of Schools in accordance with Section 3625(1) of the Education Law.

Approval Date: \_\_\_\_\_  
(Date of Superintendent's Approval)

Filed by: \_\_\_\_\_  
(Signature of Superintendent or Designee)

**SUBMIT ORIGINAL TO THE STATE EDUCATION DEPARTMENT. RETAIN A COPY FOR YOUR SCHOOL DISTRICT RECORDS.**