

# Quantity Purchase Agreement With The State Of Indiana

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Requisition Nbr.:	Pest Control	
Effective Date:	08/01/2025	
Expiration Date:	07/31/2029	
Agency Number:		
Facility:	ASA-GSA Pest Control	
Vendor ID:	0000279927	
Vendor Telephone Nbr:		
Name Of Contact Pers:		
Contact Email:		
FAX Number:		

Vendor  
Remit to: ROLLINS INC  
ORKIN LLC  
2170 PIEDMONT RD NE  
ATLANTA GA 30324

Name and  
Address  
of Vendor: ROLLINS INC  
ORKIN LLC  
2170 PIEDMONT RD NE  
ATLANTA GA 30324

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.  
The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date.  
The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement.  
**Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.**

Line Number	Quantity	UNIT	Article and Description	Unit Price
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QPA#94203 Commodities: Pest Control Services Contractor: Rollins/ DBA Orkin GSA Co-op agreement

If you are located on the Government campus (Government Center North & South or State house) Please contact facilities before contacting Rollins/Orkin.

Facilities contact (317) 232-3156. Or submit work order through QR code located in nearest restroom.

Please contact Contract account manager for quote of services. To start services a PO number is needed. Unless emergent P-Card can be used as it should not be a recurring issue.

Vendor contact: Noah Shaw .noah.shaw@rollins.com, Text/Voice: 317-225-0807

IDOA Vendor Manager: Kristine Kruger, available at KrKruger@idoa.in.gov Please contact if you have questions.

Important details Agencies may need to provide:

- List of facilities with their complete addresses to include street address, city and zip  
Point of Contact (to include NAME, PHONE and eMail) that Orkin may contact to request one or more site inspections
- # of buildings at each location that will require service
- Square footages of each building that will require service
- Individual invoiced or consolidated billed
- Method of payment: purchase order, PCARD
- Any current issues they may be currently experiencing

Turn around times for inspections and quotes may have a delay. If you feel your delay is to long please reach out to vendor manager.

The following UN/CEFACT Unit of Measure  
Common Codes are used in this document:

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature	Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3150		