



# POLARIS<sup>®</sup>

## SALES INC.

Polaris Sales Inc  
 2100 Hwy 55, Medina (Hamel), MN 55340  
 Phone: 866-468-7783 Fax: 763-847-8288

**Contact  
 Information:**

Name: Monte Nelson  
 Email: Monte.Nelson@ci.northfield.mn.us  
 Phone: 507-663-9301 Ext:  
 Fax:

**Bill To:**  
 Northfield Police Department

## QUOTE

[government.sales@polarisind.com](mailto:government.sales@polarisind.com)

[www.polarisdefense.com](http://www.polarisdefense.com)

[www.polarisindustries.com](http://www.polarisindustries.com)

Quote Number: QUO-42519-B7HY  
 Revision #: 0  
 Date: 7/13/2018  
 Quote Expires: 8/12/2018

Contract Name: Polaris Direct  
 Contract #:  
 Expiration Date:

Cage: 3FP69  
 Duns#: 123399383  
 Tax ID#: 41-1921490

Freight	Delivery Terms	Payment Terms	Payment Methods
FOB Destination US Continental (CONUS) Only	Within 60 days	Net 30	Visa Mastercard Wire Check

Item #	QTY	Description	MSRP	Discount Price	Extended
R18RVU99AS	1	RANGER Crew XP 1000 EPS HVAC Sunset Red - 49 State	\$25,999.00	\$23,992.06	\$23,992.06
2883979	1	Deluxe Emergency Light Kit	\$7,599.99	\$6,355.66	\$6,355.66
2883982	1	Premium Emergency Light Bar	\$4,999.99	\$4,181.35	\$4,181.35
2881459	1	XP 900 / Crew Front Hood Storage Rack	\$349.99	\$292.69	\$292.69
5413781	2	All Trail II Multi-Surface Tire (25x9-12) Front, each	\$157.79	\$131.96	\$263.92
Body Panel Kit	1	Law Enforcement Body Panel Kit		\$549.99	\$549.99
5414346	2	All Trail II Multi-Surface Tire (25X11-12) Rear, each	\$210.29	\$175.86	\$351.72



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Item #	QTY	Description	MSRP	Discount Price	Extended
Computer Mount	1	Havis Laptop / Tablet mount		\$249.99	\$249.99
Comments:				<b>SUBTOTAL</b>	\$36,237.38
				<b>INSTALL*</b>	\$130.00
				<b>FREIGHT</b>	\$0.00
				<b>TAX</b>	\$0.00
				<b>TOTAL</b>	\$36,367.38

\*Installation Pricing is Open Market

## Acceptance and Payment Information

Wire Payment:  
US Bank  
602 2nd Ave South  
Minneapolis, MN 55402

Phone: 1-888-799-4737  
ABA#: 091 000 022  
Acct#: 1 702 2513 9170  
Ref: Polaris Direct RANGER Crew XP 1000 EPS HVAC Sunset Red - 49  
State \_\_\_\_\_  
PO#: \_\_\_\_\_

### Ship To Address:

Name:  
Address:  
Address:  
Address:  
City, State & ZIP:  
Contact Name:  
Phone:

### Billing Address:

Name:  
Address:  
Address:  
Address:  
City, State & ZIP:  
Contact Name:  
Phone:

Credit Card Holder:



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Credit Card Type: VISA / Mastercard

Card Number:

Expiration Date:

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To accept this quotation, sign here and return: \_\_\_\_\_

Printed name: \_\_\_\_\_