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*Official signed contract documents are on file with OMES Central Purchasing.*

**Contract title:** Ground Maintenance equip & services.

**Contract Number:** SW0196KNA

**Date of Contract issuance:** 04/12/2023

**Contract period:** 04/12/2023 through 02/05/2025

**Agreement period:** 04/12/2023 through 02/05/2028

**Type of contract:** Mandatory  Non-Mandatory

**OMES Central Purchasing contact:** Darlene Saltzman, CPOII

**Title:** SW Category Manager

**Ph:** (405) 521-6667

**Email:** [Darlene.saltzman@omes.ok.gov](mailto:Darlene.saltzman@omes.ok.gov)

**Supplier name:** KUBOTA OF NORTHWEST ARKANSAS INC (Springdale)

**Supplier ID:** #0000364031

**Contract ID** #6823

**Supplier Point of Contact:** Tyler Tipton

**Supplier address:** PO BOX 8050

**City:** Springdale **State:** AR **Zip Code:** 72766-8050

**Phone #:** 1.918-224-1565 Ext 4061 **Email:** [tтиpton@springdaletractor.com](mailto:tтиpton@springdaletractor.com)

**Contract Overview:**

**This Statewide Contract resulted from the Solicitation #0900000552 for  
SW0196KNA, Ground Maintenance equip & services.**

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**Authorized Users: All state departments, boards, commissions, agencies, and institutions, in  
Addition to counties, school districts and municipalities which may avail themselves of this  
contract.**

**How to order:**

- 1. For product and pricing information review awarded contract documents “Attachment Named  
Exhibit #3 & #4 Pricing”.**
  - 2. Request a quote from the supplier or any approved authorized dealer listed below. All quotes  
must reference SW0196KNA**
  - 3. Generate a purchase order made payable to the desired supplier. You must reference the  
statewide  
contract number SW0196KNA on your purchase order by attaching the PeopleSoft Contract.**
  - 4. Email your purchase order to the designated supplier sales representative**
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**Available Brands:**

**KUBOTA OF NORTHWEST ARKANSAS INC (Springdale Tractor)**

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**Available Products and Services:**

**Ground Maintenance equip & services.**

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**Authorized Dealer/Reseller(s):**

**Supplier name:** NA

**Supplier ID #:**

**Contract ID #:**

**Supplier Point of Contact:**

**Supplier address:**

**City:**

**State:**

**Zip Code:**

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**Phone #:** 1 - - -

**Email:**