

# **City of Scottsbluff, Nebraska**

**Monday, November 2, 2015**

**Regular Meeting**

## **Item Reports6**

**Council to consider approving the postage machine lease for the Library and authorize the Mayor to sign the agreement.**

**Staff Contact: Abby Yellman, Librarian**

## Agenda Statement

Item No.

For Meeting of: November 2, 2015

**AGENDA TITLE:** Postage Machine Lease Renewal

**SUBMITTED BY DEPARTMENT/ORGANIZATION:** Library

**PRESENTATION BY:** Abby Yellman, Library Director

**SUMMARY EXPLANATION:**

Attached is the lease agreement renewal for the library's postage machine. The cost includes the machine rental. The company has agreed to upgrade the library's current machine to the IN-360 model, which will be Wi-Fi compatible/ready for both software upgrades and the adding of postage each month.

**BOARD/COMMISSION RECOMMENDATION:**

**STAFF RECOMMENDATION:** The Library Director respectfully asks the Mayor to sign and authorize the lease renewal for the upcoming budget year.

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<b>EXHIBITS</b>				
Resolution <input type="checkbox"/>	Ordinance <input type="checkbox"/>	Contract <input checked="" type="checkbox"/>	Minutes <input type="checkbox"/>	Plan/Map <input type="checkbox"/>
Other (specify) _____				

**NOTIFICATION LIST:** Yes ☐ No ☐ Further Instructions ☐  
Please list names and addresses required for notification.

**APPROVAL FOR SUBMITTAL:** \_\_\_\_\_  
City Manager

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Rev: 11/15/12 City Clerk

## Section (A) Dealer Information

Dealer Office Number: 9470	Dealer Office Name: Midwest Connect	Phone #: (308) 238-5070	Date Submitted:
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## Section (B) Billing Information

Company Name (Full legal name): Scottsbluff Public Library	
DBA:	
Billing Address: 1809 3rd Street	
Billing City: Scottsbluff	State: NE Zip Code + 4: 69361
Billing Contact Name: Abbigail Yellman	Contact Phone Number: (308) 630-6251
Billing Contact Title: Director	Contact Fax Number: (308) 630-6293
Billing Contact email Address: ayellman@scottsbluff.org	Purchase Order Number:

## Section (C) Installation Information (if different than Billing Information)

Company Name (Full legal name): Scottsbluff Public Library	
DBA:	
Installation Address (No PO Boxes or General Delivery): 1809 3rd Street	
Installation City: Scottsbluff	State: NE Zip Code + 4: 69361
Installation Contact Name: Abbigail Yellman	Phone Number: (308) 630-6251
Installation Contact Title: Director	Fax Number: (308) 630-6293
Installation Contact email Address: ayellman@scottsbluff.org	

## Section (D) Products

	Quantity	Model / Part Number	Description (Include Serial Number, if applicable) <input type="checkbox"/> See additional listed products on attached continuation schedule.
1	1	IN360WP30	IN360 Digital Mailing System w/30lb Scale Platform
2	1		wifi Router
3			
4			
5			

## Section (E) Lease Payment Information & Lease Payment Schedule

Tax Status: <input type="checkbox"/> Taxable <input checked="" type="checkbox"/> Tax-Exempt. Certificate attached.	Period	# of Months	Monthly Payment (plus applicable taxes)
	First	63	\$122.00
	Next		
	Next		
	Next		
Billing Frequency:			
<input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Annually			
Billing Method:	Current Lease Number:		
<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Government Payment in Arrears	New Lease Number:		

## Section (G) Postage Meter & Postage Funding Information

Main Post Office Name: Scottsbluff	Post Office 5-Digit Zip Code: 69361
Postage Funding Method:	Postage Funding Account:
<input checked="" type="checkbox"/> Bill Me <input type="checkbox"/> Prepay by Check <input type="checkbox"/> ACH Debit	<input type="checkbox"/> POC <input type="checkbox"/> TMS <input type="checkbox"/> New <input type="checkbox"/> Existing Existing Account Number
Attach ACH Authorization Form	Attach USPS CPU Authorization Letter

## Section (H) Services, iMeter Apps and neoShip

Rate Protection:	<input checked="" type="checkbox"/> Online Postal Rates <input type="checkbox"/> RCP (Shipped Update) <input type="checkbox"/> None	Covered Product:
iMeter Apps:	<input type="checkbox"/> Online Postal Expense Management <input type="checkbox"/> Online E-Services <input type="checkbox"/> neoShip Online Shipping Software (requires neoFunds/TotalFunds and neoShip Install & User Guide on Product Line above (EP70GUIDES))	Covered Product:
Software:	<input type="checkbox"/> Software Advantage	Covered Product:
Dealer Services:	<input checked="" type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Installation / Training	

## Section (F) ACH Direct Debit for Lease Payments (Attach Voided Check)

Bank Name	Bank Contact Name
Bank City, State	Bank Contact Phone Number
Bank Routing Number	Bank Account Number

## Section (I) Approval

Existing customers who currently fund the Postage account by ACH Debit will not be converted to neoFunds/TotalFunds unless initiated here \_\_\_\_\_.

This document consists of a Product Lease ("Lease") with MailFinance Inc.; and a Postage Meter Rental Agreement ("Rental Agreement"), and an Online Services and Software Agreement with Neopost USA Inc.; and a neoFunds/TotalFunds Account Agreement with Mailroom Finance, Inc. Your signature constitutes an offer to enter into the Lease and, if applicable, the other agreements, and acknowledges that you have received, read, and agree to all applicable terms and conditions (version DealerLease-06-13), which are also available at <http://www.neopostusa.com/terms/DealerLease-06-13.pdf>, and that you are authorized to sign the agreements on behalf of the customer identified above. The applicable agreements will become binding on the companies identified above only after an authorized individual accepts your offer by signing below, or when the equipment is shipped to you.

Authorized Signature:	Print Name and Title:	Date Accepted:
Accepted by Neopost USA and its Affiliates		Date Accepted: