



Statewide Contract Summary

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

Contract title: Ground Maintenance equipment & services.

Contract Number: SW0196DM

Date of Contract issuance: 02/06/2023

Contract period: 02/06/2023 through 02/05/2024

Agreement period: 02/06/2023 through 02/05/2028

Type of contract: Mandatory ☒ Non-Mandatory ☐

OMES Central Purchasing contact: Cini Zacharia, CPOII

Title: Contracting Officer II

Phone: (405) - 522 - 9078

Email: Cini.zacharia@omes.ok.gov

Supplier name: DIAMOND MOWERS LLC

Supplier ID #: 0000070687 **Contract ID #:** 0-6801

Supplier Point of Contact: Dacotah Buum

Supplier address: POBox 85030

City: Sioux Falls

State: SD

Zip Code: 57118 - 5030

Phone #: 1-605-977-3352

Email: dbuum@diamondmowers.com

Supplier name:

Contract Overview:

**This Statewide Contract resulted from the Solicitation #0900000552 for
SW0196DM, Ground Maintenance equipment & services.**

**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 SW0196DM**
 - 3. Generate a purchase order made payable to the desired supplier. You must reference the
statewide
contract number SW0196DM 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:

DIAMOND MOWERS LLC

Available Products and Services:

Ground Maintenance equip & services.

Authorized Dealer/Reseller(s):

Supplier name: NA

Supplier ID #:

Contract ID #:

Supplier Point of Contact:

Supplier address:

City:	State:	Zip Code:	-
Phone #: 1 - - -	Email:		

Supplier name:

Supplier ID #:	Contract ID #:
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Supplier Point of Contact:

Supplier address:

City:	State:	Zip Code:	-
Phone #: 1 - - -	Email:		