

SIGNATURE PAGE

RFP# P-25-2026

To the Board of Recreation Commissions:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: Coastal Elite Veterinary Services
(PRINT)

Preparer's Name: Loree A. Mahalchick - Practice Manager
(PRINT)

Signature: Loree A. Mahalchick 10/31/25
(DATE)

Address: 3701 US HWY 9, Howell, NJ 07731

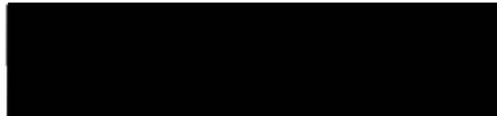
Telephone No.: 732-780-7563

Fax No.: 732-780-5265

E-Mail Address: myhorsevet@aol.com

*****(This should be the email where Contracts would be sent)*****

Contact Person: Loree A. Mahalchick

FEIN: 
(Federal Employee ID)

SUBMITTED BY: Coastal Elite Veterinary
(Company name) Services

(RFP #P-25-2026)

PROPOSAL

PROVIDING VETERINARY SERVICES

TO THE MONMOUTH COUNTY BOARD OF RECREATION COMMISSIONERS, LINCROFT, NJ

The undersigned hereby declares that (s)he has carefully examined the advertisement, specifications, and form of contract for furnishing the specified items and that (s)he will execute the contract according to the specifications, terms, and conditions with respect to, but not limited to, the following:

ITEM DESCRIPTION

Price

1. Farm Call / Ambulatory fee	\$ <u>82.00</u>
2. Emergency Farm Call fee	\$ <u>93. - 275.00*</u> (depends on time / holiday)
3. Physical Exam: minimum charge	\$ <u>108.00</u>
4. Colic Exam	\$ <u>130.00</u>
5. Lameness Exam: minimum charge	\$ <u>130.00</u>
6. Re-Examine: minimum charge	\$ <u>85.00</u>
7. Respiratory Exam	\$ <u>97.00</u>
8. Rectal Exam	\$ <u>81.00</u>
9. Pre-Purchase Exam	\$ <u>800.00</u>
10. Ultrasound	\$ <u>250.00</u>
11. Radiography: per plate (Min. # scans: <u>1</u>)	\$ <u>145.00</u>
12. Additional Radiography Views After Minimum	\$ <u>65.00</u>
13. Float Teeth * <u>Jan - July</u> \$ <u>140.00</u>	\$ <u>120.00*</u> if Floats Done Aug, Sept. Oct, Nov. or Dec.
14. Dremel Tooth	\$ <u>(N/A)</u>
15. Tooth Extraction	\$ <u>150.00</u>
16. Coggins - EIA	\$ <u>70.00*</u> Rush = 160.00
17. Lyme Titer	\$ <u>165.00</u>
18. Fecal Exam	\$ <u>55.00</u>
19. Clean Sheath	\$ <u>55.00</u>
20. Eastern and Western Encephalitis and Tetanus Vaccine	\$ <u>65.00</u>
21. Influenza and Rhinopneumonitis Vaccine	\$ <u>45.00</u>
22. Botulism Vaccine	\$ <u>45.00</u>

23. Pinnacle I.N. Vaccine	\$ <u>52.00</u>
24. West Nile Vaccine	\$ <u>45.00</u>
25. Rabies Vaccine	\$ <u>35.00</u>
26. Triangle-10 Vaccine	\$ <u>30.00</u>
27. Fermicon CD/T -- Clostridium C & D/ Tetanus Vaccine	\$ <u>29.00</u>
28. FarrowSure Vaccine	\$ <u>55.00</u>
29. Consultation: per hour	\$ <u>375.00</u>
30. Pro-Stride Kit Collection & Processing	\$ <u>1135.00</u>
31. Carcass Removal	\$ <u>825.00</u>
32. Hourly rate for inspection at the Monmouth County Fair as based on examples in Delivery of Services section	\$ <u>450.00</u>
33. Outside Services Fee	\$ <u>10.00</u>

Total Net Price (Items 1-33): \$ 5877.00

SPECIAL NOTES:

Address the following:

1. What constitutes an "emergency farm call?"
Any same day appointment that was not previously scheduled - But needs to be seen ASAP.
2. What are "normal" hours and days of operation (i.e. 8:00 am to 5 pm, M-F)?
Monday - Friday 9:00 am - 5:00 pm
3. What constitutes over-time hours and surcharges for calls during these times?
All calls for appointments outside "normal" hours - we are available 365 days, 24/7.

NOTE: N.J. TAX EXEMPTION NO. #69-0220842

VARIANCE IF ANY:
