IFB #18-37
Electrical Testing, Maintenance, and Repair

ATTACHMENT 1 PART A, B, C, and D
BID SUBMISSION FORM

COMPANY NAME: _____

ADDRESS: _____

_____

CONTACT PERSON: _____

TELEPHONE: _____ E-MAIL: _____

FAX: _____ FED ID #: _____

Pursuant to Title 13.1 or Title 50 of the Virginia Code provide the identification number issued to your firm by the Virginia State Corporation Commission (VSCC) in the space provided below, if your firm is not required to be authorized to transact business under Title 12.1 or Title 50, or any other law; provide a statement why your firm is not required to be so authorized.

_____ _____

Company Name Identification Number

If you do not have a VSCC identification number, explain why it is not required in the space below:

_____

_____

_____

All Bidders must specify the following information:

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BID SUBMISSION FORM
LABOR RATES

Per section 4.8 G; Bidder shall provide hourly labor and material rates for providing services not specifically covered under the Annual Maintenance Service, as identified in tables A&B below. Labor rates shall include all direct and indirect costs such as transportation, general and administrative costs, and profit etc. Labor rates shall not be billed in addition to unit pricing for services listed in parts A& B below.

*Note to Bidders, Attachments A, B, C & D Pricing Sheets are in a Microsoft Excel Workbook, please complete each 'tab' of the Workbook (ATT 1 A, ATT 1 B, ATT 1 C & ATT 1 D).

LABOR RATES AND MATERIALS FOR EMERGENCY REPAIR, SPECIAL MAINTENANCE AND REPAIRS				
	Labor Rates – Regular and Overtime:	**Quantity**	**Unit of Measure**	**Unit Price**
1.	**Technician – Regular**	**4**	**Hour**	**$**
2.	**Supervisor – Regular**	**4**	**Hour**	**$**
3.	**Technician – Regular**	**8**	**Hour**	**$**
4.	**Supervisor – Regular**	**8**	**Hour**	**$**
5.	**Technician – Regular**	**1**	**Hour**	**$**
6.	**Supervisor – Regular**	**1**	**Hour**	**$**
7.	**Technician - Overtime**	**1**	**Hour**	**$**
8.	**Supervisor - Overtime**	**1**	**Hour**	**$**
TOTAL COMBINED LABOR RATES				**$**
TOTAL UNIT PRICING PART A				**$**
TOTAL UNIT PRICING PART B				**$**
TOTAL UNIT PRICING PART D				**$**
SUMMARY TOTAL LABOR RATES, and UNIT PRICING PARTS A & B				**$**
INDICATE PERCENTAGE DISCOUNT OFF MANUFACTUER'S PRICE LIST FOR PARTS MATERIALS AND EQUIPMENT: _____%				
TOTAL UNIT PRICING PART C				**$**

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CONTACT PERSON

List a contact person's name and telephone number for normal FW working hours 7:30 a.m. to 5:00 p.m., Monday-Friday. Answering machines are unacceptable as a point of contact. For emergency calls, outside normal FW working hours (nights and/or weekends), list a contact person's name and telephone number, or have a voice mail paging system or answering service. Bidders using a voice mail paging system or answering service, in lieu of a contact person, shall be required to initiate a call back to the sender within (1) one hour.

Type of answering system used by your firm (check one):
_____Voice Mail Paging System _____Answering Service

Contact for Normal Working Hours:
Name(s) _____
Telephone _____

Contact for Emergency Calls (outside normal FW working hours):
Name(s) _____
Telephone _____

- **TERMS:** All bids will be interpreted as 2%-30, Net 31, unless otherwise specified herein. FW's minimum payment term is Net 31 days. By submitting an offer to sell in response to this solicitation, all Bidders acknowledge and agree to this requirement.

By my signature I certify that I am acting as an agent for the above listed firm and am fully authorized to bind the firm to the terms, conditions and specifications of this solicitation, as well as any addenda thereto.

Company Name: _____

Signature: _____

Printed Name: _____

Title: _____ Date: _____