

Firm Name:

Address:

Email Address:

BID REQUEST FORM

An executed original of this form must be submitted to the Purchasing Department along with the scope of work. Scope of work must include start and end date, bid due date and detailed description of what goods or services are being purchased. Once all information/documentation is supplied, the Purchasing Department will prepare the RFP or RFQ. Complete all information that applies.

Project Information						
Requester Name:						
Requester Email:						
Department Name:						
Project Name:						
Estimated Cost:						
Chart of Accounts/Project #:						
Funding Source:						
Bid Method:	Quote	Advertised	Board Waiver	State Contract		
Required Disciplines:	Electrical Work		HVACR Work			
Plumbing Work	Structural Steel/ Ornamental Iron Work		Asbestos Abatement Work			
Other	Yes / No	Comments				
Pre-bid Meeting:						
Drawings/Specifications:						
DPMC Requirement:						
Bid Allowance:						
Add Alternates:						
Unit Prices:						
Crane Required:						
Brief description of goods	or services to be	procured & whe	n (attach additional s	heet if necessary)		
Architect/Engineer Information (if applicable)						

Department Approval						
Name:		Name:				
Title:		Title:				
Signature:		Signature:				
Date:		Date:				
Capital Project Requests Only						
Name:						

List of Vendors (notify for RFP or receive copy of BW or RFQ)

Phone

Email (REQUIRED)

Contact Name

Vendor Name

Title: Director Capital Project Finances

Signature:

Date: _____