

APPENDIX B – RESPONSE FORM
RESPONSE FORM FOR SOLICITATION 042-20

Submit an original Response Form, one (1) duplicate copy and one (1) CD or thumb drive along with other required forms in a sealed envelope to:
JEA Procurement Dept., Tower 1 Conference Room, 21 West Church Street, Jacksonville, FL 32202

Company Name: _____

Company's Address _____

License Number (if applicable) _____

Phone Number _____ FAX No: _____ EMAIL Address: _____

BID SECURITY REQUIREMENT

☒ **None required**

☐ Certified Check or Bond

_____ % \$ _____

TERM OF CONTRACT

☐ One Time Purchase

☒ **Annual Requirements – Five (5) Years**

☐ Other, Specify:

SAMPLE REQUIREMENTS

☒ **None required**

☐ Samples required prior to Bid Opening

☐ Samples may be required subsequent to Bid Opening

SECTION 255.05, FLORIDA STATUTES CONTRACT BOND

☒ **None required**

☐ Bond required \$ _____ % of Bid Award

QUANTITY REQUIREMENTS

☐ Quantities indicated are exacting

☒ **Quantities indicated reflect the approximate quantities to be purchased throughout Contract period and are subject to fluctuation. JEA does not commit to any volume.**

INSURANCE REQUIREMENT

☐ None required

☒ **Insurance required**

PAYMENT DISCOUNTS

☐ 1% 20, net 30

☐ 2% 10, net 30

☐ Other _____

☐ None Offered

Quote the following materials

Item No.	ENTER HEREON YOUR RESPONSE FOR THE FOLLOWING DESCRIBED ARTICLES OR SERVICES	TOTAL RESPONSE PRICE
1.	042-20 ITN JEA Fleet Services Mobile Fueling Total Response Price – (Total from Response Workbook Cell G&H 14)	 \$0.00

☐

I have read and understood the Sunshine Law/Public Records clauses contained within this solicitation. I understand that in the absence of a redacted copy my proposal will be disclosed to the public “as-is”.

Respondent's Certification

By submitting this Response, the Respondent certifies that it has read and reviewed all of the documents pertaining to this Solicitation, that the person signing below is an authorized representative of the Respondent's Company, and that the Company is legally authorized to do business in the State of Florida. The Respondent also certifies that it complies with all sections (including but not limited to Conflict Of Interest and Ethics) of this Solicitation, and that the Respondent is an authorized distributor or manufacturer of the equipment as required in this Solicitation.

We have received addenda

_____ through _____

_____ Handwritten Signature of Authorized Officer of Company or Agent _____ Date _____

_____ Printed Name and Title _____