## Appendix B - Response Form 107-19 Bulk Muriatic Acid/Hydrochloric Acid Supply

Procurement Dept., 21 W. Church St., Bid O				
Company Name:				
Company's Address:				
License Number:				
Phone Number:FAX No.	: Email Address:			
RESPONSE SECURITY REQUIREMEN  None required Certified Check or Bond Five Percent (59)	One Time Purcha Annual Requiren Other, Specify - 1	ase ments Project Con		
SAMPLE REQUIREMENTS  None required Samples required prior to Response Open Samples may be required subsequent to Bid Opening	SECTION 255.05, FLORIDA S  None required	STATUTES		
OUANTITIES  Quantities indicated are exacting  Quantities indicated reflect the approximate quantities to be purchased  Throughout the Contract period and are subject to fluctuation in accordance with actual requirements.			INSURANCE REQUIREMENTS  Insurance required	
PAYMENT DISCOUNTS  1% 20, net 30  2% 10, net 30  Other  None Offered				
Description of Services			Total Response Price	
Total Response Price for Work as described in this Solicitation (from Response Workbook)		onse	\$	
☐ I have read and understood the Sur	nshine Law/Public Records clause	es contain	ed within this solicitation. I	
understand that in the absence of a rec	lacted copy my proposal will be d	disclosed to	o the public "as-is".	
	RESPONDENT CERTIFICATION			
By submitting this Response, the Respondent that the person signing below is an authorized do business in the State of Florida, and that the applicable). The Respondent also certifies the Ethics) of this Solicitation.	d representative of the Responding Cor he Company maintains in active status	mpany, that an appropri	the Company is legally authorized to iate contractor's license for the work (if	
We have received addenda	Handwritten Signature of Authorized Officer of Company or Agent Date			
through				
	Printed Name and Title			