## **APPENDIX B RESPONSE FORM FOR SOLICITATION 138-19**

## **Concrete Manholes for JEA Inventory Stock**

Submit an original Response Form, one (1) copy and one (1) CD or thumb drive along with other required forms in a sealed envelope to: JEA Procurement Dept., 21 W. Church St., Bid Office, Customer Center, 1st Floor, Room 002, Jacksonville, FL 32202-3139.

| Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Name:                                                                                                          |                                                                          |                                                                                                          |                       |                         |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------|-------------------------|--|
| Company's Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                |                                                                          |                                                                                                          |                       |                         |  |
| License Number (if applicable)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                                                                          |                                                                                                          |                       |                         |  |
| Phone Number FAX No: EMAIL Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                |                                                                          |                                                                                                          |                       |                         |  |
| BID SECURITY REQUIREMENT  [ X ] None required  [ ] Certified Check or Bond                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                |                                                                          | TERM OF CONTRACT  [ ] One Time Purchase  [ X ] Annual Requirements – Five (5) Years  [ ] Other, Specify: |                       |                         |  |
| [ ] Quantities indicated are exacting                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                |                                                                          |                                                                                                          | INSURANCE [ ] None re | <del></del>             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | T DISCOUNTS  net 30 net 30                                                                                     |                                                                          | ,                                                                                                        |                       |                         |  |
| Quote the following materials F.O.B. Destination: Jacksonville, FL (Commonwealth Storeroom location, Southside Storeroom location, and Jobsite Deliveries)                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                |                                                                          |                                                                                                          |                       |                         |  |
| Item No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ENTER HEREON YOUR RI<br>OR SERVICES                                                                            | ER HEREON YOUR RESPONSE FOR THE FOLLOWING DESCRIBED ARTICLES<br>SERVICES |                                                                                                          |                       | TOTAL<br>RESPONSE PRICE |  |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | JEA ITN Concrete Manholes for JEA Inventory Stock  TOTAL Response PRICE (Total from Response Workbook Cell I4) |                                                                          |                                                                                                          | \$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                                                                                               | Handwritten Sig                                                          | gnature of Authorized Officer                                                                            | of Company or A       | gent Date               |  |
| Printed Name and Title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                |                                                                          |                                                                                                          |                       |                         |  |