

RFQ FORM

Office of Hawaiian Affairs
Procurement Unit
560 North Nimitz Highway Suite 200
Honolulu, Hawaii 96817

Dear Sir/Madam:

Re: WKOP 2017-03 Gate Repair and Maintenance for Wao Kele O Puna

The undersigned has carefully read and understands the terms and conditions specified in the Request for Quotes and hereby submits the following cost proposal and application packet to perform the work specified.

Quote Attached: Y N **Total Quote Cost: \$**_____

Vendor is: Individual Partnership Corporation Joint Venture

State of Incorporation: Hawai'i * Other: _____

*If "Other", is corporate seal available in Hawaii? Yes No

Exact Legal Name of Vendor: _____

Business Address: _____

City, State, Zip Code: _____

Hawaii General Excise Tax License I.D. Number: _____

Social Security or Federal I.D number: _____

Respectfully Submitted:

Authorized (Original) Signature

Date

Name (Print)

Title

State Department of Commerce and Consumer
Affairs License Number: _____

Interested Offeror shall list below business firms and/or government agencies to which he has provided similar or identical services to those required in the scope of services for this request.

Name of Workshop	Description of Workshop	Type of Participants
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Insurance coverage to be provided by:

Commercial General Liability: _____

Name of Agent: _____

Telephone Number: _____

Worker Compensation: _____

Automobile Insurance: _____

Signature of Vendor: _____

Date: _____