



**City of Lompoc**  
**Request for Quotation #2860**  
 (This is not an order)

**PLEASE FAX YOUR QUOTE TO:**

Please respond with current pricing.  
 Be sure to supply part/catalog numbers.  
 Follow the form below.  
 Include tax and shipping charges, if any.

Send your quote to: Maria Salazar at  
 m\_salazar@ci.lompoc.ca.us  
 Department: Purchasing  
 Fax: 805/875-8738 Phone: 805/875-8001  
 By Noon: Thursday, November 9, 2017

**For Department Use**

**Vendor to Complete this Information**

Item	Qty	Description	Unit Cost	Extension
1	1	270-4888 1500 KVA, Three Phase, Radial Feed Pad Mount Transformer Primary Voltage: 12 kV Delta Secondary Voltage: 277/480 Volt Wye Per City of Lompoc Utility Department Electric Division Specification #ELE-115, R1, Dated 11/10/2011 (inventory spare)		
		California Sales Tax @ 8%		
		Exact Freight Charges (no estimates allowed)		
		Subtotal		
		No Load (Core) Loss: _____ watts x \$6.34 =		
		Load (Windings) Loss: _____ watts x \$4.31 =		
		Total Amount Bid		
2	2	270-2225 225 KVA, Three Phase, Radial Feed Pad Mount Transformer Primary Voltage: 12kV Delta Secondary Voltage: 208/120 Volt Wye Per City of Lompoc Utility Department Electric Division Specification #ELE-115, R1, Dated 11/10/2011 (inventory spare, 1200 N H developer project)		
		California Sales Tax @ 8%		
		Exact Freight Charges (no estimates allowed)		
		Subtotal		
		No Load (Core) Loss: _____ watts x \$6.34 =		
		Load (Windings) Loss: _____ watts x \$4.31 =		
		Total Amount Bid		
3	2	270-1038 37.5 KVA, Single Phase, Feed-Thru Pad Mount Transformer Primary Voltage: 12kV Delta Secondary Voltage: 240/120 Volt Delta Per City of Lompoc Utility Department Electric Division Specification #ELE-103, R3, Dated 4/18/2011 (inventory spares)		
		California Sales Tax @ 8%		
		Exact Freight Charges (no estimates allowed)		
		Subtotal		
		No Load (Core) Loss: _____ watts x \$6.34 =		
		Load (Windings) Loss: _____ watts x \$4.31 =		
		Total Amount Bid		

4	2	270-1037 37.5 KVA, Single Phase, Radial Feed Pad Mount Transformer Primary Voltage: 12 kV Delta Secondary Voltage: 240/120 Volt Delta Per City of Lompoc Utility Department Electric Division Specification #ELE-115, R1, Dated 11/10/2011 (Inventory Spare)		
		California Sales Tax @ 8%		
		Exact Freight Charges (no estimates allowed)		
		Subtotal		
		No Load (Core) Loss: _____ watts x \$6.34 =		
		Load (Windings) Loss: _____ watts x \$4.31 =		
		Total Amount Bid		

Vendors – Please submit a detail and drawing of the units you are proposing along with your response.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Address

\_\_\_\_\_  
Authorized Representative Name (please print name)

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Web Page Address

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Delivery ARO \_\_\_\_\_ Days

\_\_\_\_\_  
Discount for Payment in 20 Days: \_\_\_\_\_ %

\_\_\_\_\_  
FOB: DESTINATION

\_\_\_\_\_  
Payment Terms: Net 30



**“Registered Bidder Information Sheet”**

**RFQ No. 2860– ELECTRICAL TRANSFORMERS  
Opening Date:**

**Please immediately complete and fax this page to (805) 875-8738 to be added to the list to receive all clarifications and addendums.**

- 1. Complete this form (print or type your information).**
- 2. Fax the completed sheet to (805) 875-8738.**
- 3. Circle which method was used to secure proposal package.**

**Mail**

**Fax**

**Internet**

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Name of Proposer

\_\_\_\_\_  
Name & Title (please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Facsimile Number

\_\_\_\_\_  
Web Page Address

\_\_\_\_\_  
Contractors License Number

\_\_\_\_\_  
Expiration Date