

*When there is more than one (1) item, the City reserves the right to award separately or as a whole. Bidders must state "all or none" on bid form.

*Do you wish your bid to be considered on an "all or none" basis: _____ Yes/No.

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

Date

Delivery ARO _____ Days

Discount for Payment in 20 Days: _____ %

FOB: DESTINATION

Payment Terms: _ Net 30



City of Lompoc

“Registered Proposer Information Sheet”

RFQ No. 3006

Closing Date: 06/21/2022, 2:00pm

Please immediately complete and email to I_hilario@ci.lompoc.ca.us to be added to the list to receive all clarifications and addendums.

1. Complete this form (print or type your information).
2. Email to I_hilario@ci.lompoc.ca.us.
3. Circle which method was used to secure proposal package.

Mail

Email

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

Contractor License Number

Expiration Date