

REQUEST FOR QUOTATION

CITY OF WINTER HAVEN

" An Equal Opportunity Employer"

For additional information and clarification contact:

*** Department Name:** Community Services

***Contact Person:** Steve Pruitt

Gene Mathews

***Telephone #:** (863) 291-5745

RFQ-10-28

Please return quote to:
City of Winter Haven
Procurement Service Division
P.O. Box 2277
Winter Haven, FL 33883-2277

DATE ISSUED: March 26, 2010

Please quote on the following items:

Item*	Quantity*	Description*	Unit Cost	Total Cost
No Substitutions				
Provide and Install Four Football Goal Post Sertoma Park Football Fields				
A	4	Provide and install 4 (2 sets) Football Goal Post	\$ _____	\$ _____
		per dimensions:		
		Overall total height 30'		
		Gooseneck offset 5' from goal line		
		Heavy-wall galvanized steel construction		
		4 1/2" O.D. gooseneck		
		4" O.D. x 23'4" W crossbar		
		2 3/8" O.D. x 20' T uprights		
		Goal post are finished in a durable catalyzed,		
		acrylic enamel (safety yellow paint)		
<i>Contractor is responsible for all utility locates for project. Contractor must provide signed and sealed engineered drawings. Contractor required to secure worksite to provide a safe work environment. Unit prices listed shall include all cost; No further surcharges are to be added to unit price. Contractor must provide a minimum of 1 year warranty of all materials, labor and workmanship; manufactures warranties must be provided to the Project Manager at time of acceptance of project completion. Contractor awarded project must provide a copy of License, Liability, Workers Compensation and Automobile Insurance withing 48 hours of award. Copies may be faxed or scanned and originals are to be mailed to the City of Winter Haven Attention: Procurement Dept. City of Winter Haven will provide the location for each goal post. Landscape Services Superintendent or his designee will inspect and approve all product material prior to installation and will work with approved contractor for installation dates based on completion of field renovations.</i>				

DELIVERY WANTED: With in 10 days of ARO

We offer to sell you as above F.O.B., Winter Haven, Florida. Delivery can be made in _____ days from receipt of order.

Date: _____ Return this quotation **NOT LATER THAN 2:00 P.M. April 13, 2010**

TO: Procurement Services Division, address above **or FAX TO 863-291-5666**

SIGNATURE: _____

**COMPANY NAME: _____

ADDRESS: _____

CITY/STATE _____

PHONE: _____

FAX: _____

W-9 MUST BE ATTACHED TO THE RFQ WHEN RETURNED BY THE RESPONDING VENDOR.

****PAYMENT WILL BE RENDERED TO THE NAME AND ID APPEARING ON THE W-9.**