

Public Works Project - Request for Quotation

WSDOT Contract No.					DES Contract No.								
Company Name					Date o	of quote	Quote	e expires on					
Representative's name		Phone N	Phone Number		Number	r	Email						
Address			City				State	Zip					
Contractor License #	UBI#	L8	L&I #		ESD#		SWV#						
Project Information													
Project Name					Project Location								
Scope of Work	Scope of Work												
Overview of Scope of Work													
Detail of scope or See attached Estimated length of project													
Drawings/Specifications attached: Yes No If no, explain below: N/A If N/A, explain below:													
Materials	Cost												
							Mate	erials Total					
Labor Classifica (prevailing wage		County	, с	ost pe	er hour	Lab	o. of porers sed	No. of labor hours	Total labor classification cost				
				-									
							L	abor Tota					

Other expenses (overhead, per diem, equipment, fuel, etc.)									Cost	
						Other e	xpenses	total		
Permits and Performance	ce Bond =								Cost	
					-					
						:4- 0 Df	- D	T-4-1		
				P	erm	its & Performance	e Bonas	Iotai		
							Su	btotal		
Revenue location co	de:							Tax		
DES Fees							urchase	price		
2201000				Includes ⁻	Тах,	Permits and Perfo	rmance l	Bonds		
Identify method of retaina	ge						Total	Cost		
If project is over \$35,000	0 you must have a	bond fo	r the tot	tal project cost						
If project is under \$35,0	00 select retainage	option	Вс	ond 50%	Reta	ainage				
How retainage is held	0					3				
· ·										
Please indicate if there w	ill ha sub contracto	re							Yes	No
If yes, please indicate bel								• • • • • • • •	165	NO
Subcontractor #1	- Subcontracto	- I I I I I	vviii bc v	Working on the	proj					
Representative's name		Phone	numbe	er	x number Email					
rtoprocontativo o namo		1 110110	1 Hone Hamber			Tax Hambol				
Address				City			State		Zip	
			l		-	T				
UBI#	L&I #		ESD#	!		Contractor Licens	e #	S	WV #	
What is the percentage of Subcontractor #2	f work that will be s	ubbed o	out to su	ubcontractor #1	?					
Representative's name		Dhone	numbe	ır	Fa	x number		Email		
Nepresentative's name		1 Hone	Hullibe	i	ı a	X Humber		Liliali		
Address		l		City			State		Zip	
				-						
UBI#	L&I #		ESD#	!		Contractor Licens	e #	S	WV#	
					-					
What is the percentage of	f work that will be s	ubbed o	out to su	ubcontractor #2	?					
Subcontractor #3		Ι				· · · · · · · · · · · · · · · · · · ·				
Representative's name		Phone	Phone number		Fa	x number		Email		
Address				City			State		Zip	
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UBI# L&I#									'	
UBI#	L&I #		ESD#	<u> </u> !		Contractor Licens	e #	S	' WV#	
UBI#	L&I #		ESD#	<u> </u>		Contractor Licens	e #	S		