APPENDIX D COST SUBMITTAL



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NATIONAL SU	MMER TRANSPO	ORTATION INST	TITUE (NSTI)		
Date RFP Sent:					
Proposal Due By Date:	Time:			-	
Please complete the information below for your prop Cost Submittal.	osal and submit this	form as part of the	e		
Contractor Company Name]	
Description	Quantity	Unit of Measure	Unit Price	Line Item Total	
	1	each		\$	-
GRAND TOTAL \$.					
If selected, I understand that the above price would be in effect only for the period shown on the fully executed Contract.					
Contractors's Signature*:					
Printed Name:	Title:				
*MUST BE SIGNED BY VENDOR'S AUTHORIZED SIGNATORY					