

# **EXHIBIT L**

## **REQUEST FOR QUOTE FORM - SAMPLE**

**EXHIBIT L**  
**REQUEST FOR QUOTE (RFQ) FORM**  
ITQ #3514T02, "Traffic Engineering Data Count"

**Date RFQ Sent:** \_\_\_\_\_ **Engineering District(s):** \_\_\_\_\_

**Completed RFQ Due:** \_\_\_\_\_ **AM/PM** **on:** \_\_\_\_\_

**Quote Opening:** \_\_\_\_\_ **AM/PM** **on:** \_\_\_\_\_

You have been identified as a Qualified Contractor for this District's Traffic Engineering Data Count Services. Please complete the information below and return it to the address at the bottom of this form. The form **MUST** be received no later than the date and time shown above. Opening of the quotes received by the deadline shall take place at the date and time shown above.

This Request for Quote (RFQ) incorporates by reference the Terms and Conditions of the Traffic Engineering Data Count ITQ #3514T02.

**Purchase Order Term:** \_\_\_\_\_

If you are the lowest responsive and responsible bidder, you shall receive a Purchase Order as your Notice to Proceed.

**DO NOT** respond to request to commence traffic data count **until the Validity Start Date shown on the Purchase Order.**

**DO NOT** respond to request to commence traffic data count **unless you receive a Purchase Order.**

**District(s) to Service:** \_\_\_\_\_

**Anticipated Start Date:** \_\_\_\_\_ **Anticipated End Date:** \_\_\_\_\_

**Contractor Name (as it appears on your Contract):**  
\_\_\_\_\_

SAP Vendor #: \_\_\_\_\_ Contract #: \_\_\_\_\_

**If bidding on this project, complete Cost Submittal Workbook information and return form to address below:**

**COST SUBMITTAL:**

Cost for 24 Hour Counts: \_\_\_\_\_ Cost for 48 Hour Counts: \_\_\_\_\_

**Total cost per count (24 hour + 48 hour):** \_\_\_\_\_

**If not bidding on this project, check box and return form to address below:**

I understand that the above price would be in effect only for the period shown on the Purchase Order if selected as the lowest responsive and responsible bidder.

Contractor's Signature (ink): \_\_\_\_\_ Date: \_\_\_\_\_

Contractor's Title: \_\_\_\_\_

**MUST BE SIGNED BY CONTRACTOR'S AUTHORIZED SIGNATORY**  
**Attach completed Cost Submittal form to RFQ response and submit to:**

PA Department of Transportation  
ATTN: