

REQUEST FOR TASK ORDER QUOTE
POOL INSPECTION AND MAINTENANCE SERVICES
DCAM-19-NC-IFC-0003 [CONTRACTOR NAME]
BASE PERIOD

(CLIN) Contract Line Item Number	PRODUCT DESCRIPTION	CONTRACTED HRLY RATE/UNIT PRICE	QTY	EXTENDED COST
001	TECHNICIAN	-	-	\$ -
002	TECHNICIAN HELPER	-	-	\$ -
003	MATERIALS	-	-	\$ -
			0	\$ -

SERVICE LOCATION

CONTRACTOR

AUTHORIZED CONTRACTOR REPRESENTATIVE (PRINTED NAME)

AUTHORIZED CONTRACTOR REPRESENTATIVE (SIGNATURE)

DATE

SAMPLE FORM OF QUOTE