

REQUEST FOR QUOTATIONS <i>(THIS IS NOT AN ORDER)</i>		The Notice of Small Business Purchase Set-Aside on the reverse of this form <input type="checkbox"/> is <input type="checkbox"/> is not applicable.		PAGE OF PAGES 1 1	
1. SOLICITATION NO.	2. DATE ISSUED	3. REQUEST/PURCHASE REQUEST NO. RQ729460		4. COMMODITY GROUP AND CLASS	RATING
5A. ISSUED BY Department of Real Estate Services Goods and Services 2000 14 th Street, NW, 5 th Floor Washington DC 20009				6. DELIVER BY <i>(Date)</i> <i>days from date of award</i> Period of Performance: Shall be from date of award through September 30, 2011	
5B. FOR INFORMATION CALL: <i>(Name and telephone no.) (No collect calls)</i> Charmaine Callahan (202) 671-2831 Fax (202) 442-9506				7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER <i>(See Schedule)</i>	
8a. Vendor Tax ID #				9. DESTINATION <i>(Consignee and address, including ZIP code)</i>	
8b. Duns Number					
10. PLEASE FURNISH QUOTATIONS TO ISSUING OFFICE ON OR BEFORE 4:00 PM (Date) March, 11 th , 2011		11. BUSINESS CLASSIFICATION <i>(Check appropriate boxes)</i> <input checked="" type="checkbox"/> SMALL <input checked="" type="checkbox"/> LOCAL <input checked="" type="checkbox"/> DISADVANTAGED <input checked="" type="checkbox"/> RESIDENT-OWNED			
IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contracts for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.					
12. SCHEDULE (Include applicable Federal, State and local taxes)					
ITEM NO. (a)	SUPPLIES/SERVICES (b)	UNIT (c)	ESTIMATED QUANTITY (d)	TOTAL ESTIMATED PRICE (e)	(f)
01	<p style="color: red;">Please see attached SOW;</p> <p>The District of Columbia through its Department of Real Estate Services (DRES) desires to have interior and exterior doors replaced Kennedy and Riggs Recreation Centers located at: Kennedy Recreation: 1401 7th. Street , NW Riggs Recreation Center: 501 Riggs Road NE</p> <p>The existing doors are not functioning property, affecting the recreation centers' ability to properly secure the sites. The contractor selected shall provide all labor, materials, and equipment as specified and as required for a complete and proper execution, and examine the area(s) and conditions under which the work shall be performed.</p> <p>REQUIREMENTS: Contractors bid shall include cost to follow all applicable laws and codes mandated by the District of Columbia while performing work under this SOW. This RFQ is designated for certified local, small business enterprise (LBE and/or SBE) bidders only under the provisions of the "Small, Local, and Disadvantaged Business Enterprise Development and Assistance Act of 2005" (the Act), Title II, Subtitle N, of the "Fiscal Year 2006 Budget Support Act of 2005" as amended. A SBE must be certified as small in the procurement category of Building Construction (Construction Services, General etc.) in order to be eligible to submit a bid in response to this solicitation</p>				

02	<p>Vendors are encouraged to attend the site visit on March 10th, 2011 @ 1 pm at Kennedy Recreation: 1401 7th Street, NW, followed by site visit to Riggs Recreation Center: 501 Riggs Road NE</p> <p>Please complete the RFQ form and submit quote electronically by 4pm on or before March 11th, 2011 To: Charmaine.callahan@dc.gov (email)</p> <p>Amendment</p> <p>The original scope of work mentions a maximum of 10 doors to be replaced. The scope of work is now amended as per items below:</p> <p>Kennedy Recreation Center Replace 2 doors 15 door stoppers 1 set of hinges for door</p> <p>Riggs Recreation Center Replace 10 doors 8 door stoppers 6 door hardware</p> <p>All other conditions remain the same</p>				
13. DISCOUNT FOR PROMPT PAYMENT	10 CALENDAR DAYS 10%	20 CALENDAR DAYS 5%	30 CALENDAR DAYS 3%	CALENDAR DAYS	%
14. NAME AND ADDRESS OF QUOTER (<i>Street, city, county, State and ZIP Code</i>) Government Tax ID number	14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		16. DATE OF QUOTATION		
	17. NAME AND TITLE OF SIGNER (<i>Type or print</i>)				