STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY

**AGENCY REQUEST FOR PROPOSAL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **VENDOR NAME AND ADDRESS:** | | **RETURN THIS PROPOSAL TO:**  [DOT-EMS\_BID.Procurement@dot.nj.gov](mailto:DOT-EMS_BID.Procurement@dot.nj.gov) | | **DELIVER TO:**  NJ Department of Transportation Procurement Division  Bureau of Equipment, Materials & Supplies 1035 Parkway Avenue  Trenton, NJ 08625 | |
| **SBE CATEGORY:**  N/A | | **FAX NUMBER:**  N/A | |
| **NOTE:**  **This proposal form must be received by 10:00 a.m. May 2nd, 2024** at  [DOT-EMS\_BID.Procurement@dot.nj.gov](mailto:DOT-EMS_BID.Procurement@dot.nj.gov) | | **AGENCY PERSON TO CONTACT:**  Nikki Ghorbani | | | |
| **FISCAL YEAR:**  2024 | **ACCOUNT NUMBER:**  **N/A** | **AGENCY REFERENCE NUMBER:** | | **COMMODITY NUMBER:** | |
| **ITEM DESCRIPTION** | **QUANTITY** | **UNIT** | **DESCRIPTION (ALL ITEMS MUST BE DELIVERED F.O.B. DESTINATION)** | **UNIT PRICE** | **TOTAL AMOUNT** |
| Tow-Behind Air Compressors  NJDOT Bldg. 7  1035 Parkway Avenue  Trenton, NJ 08625 | 32 | Each | See attached Request For Quote (RFQ) for details |  |  |
|  |  |  |  |  |  |
| Freight | 32 | Each |  |  |  |
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| **Bidder may supply their own quote; however, the total price for all aspects of this bid must appear on this PB-120 form.** | |  |  |  |  |
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| **PRICES ARE FIRM UNTIL THE FOLLOWING DATE:** | | | | **TOTAL:** |  |
| **CASH DISCOUNT:** | **DATE OF DELIVERY:** | **VENDOR'S FEDERAL I.D. NUMBER:** | | **VENDOR'S TELEPHONE NUMBER:** | |
| **VENDOR'S SIGNATURE (Must be Signed):** | | **PRINT OR TYPE NAME BELOW:** | | **DATE:** | |

PB-120 rev. 04/21