



PURCHASING DEPARTMENT

TWELVE EAST 4TH AVENUE, SUITE 106 • ROME, GEORGIA 30161

PHONE: 706.291.5118 • FAX: 706.290.6099 • www.romefloyd.com

Date: 2/5/14

To: To Whom It May Concern

Request for Quote: Variable Speed Drive (RFQ 15-0212)

Floyd County is requesting quotes for variable speed drive TECO A510-4075-C3.

All quotes will be submitted on the attached quote sheet. Providers may submit additional information with quote.

Quotes are to include all costs including shipping and delivery. Quotes submitted will be FOB Destination (Rome Ga. 30161).

Quotes are due no later than **2pm 12 Feb 2015**. Quotes may be submitted by Email, Fax, US Mail or hand delivered to this office. Fax 706 290-6099 – Email: Graye@floydcountyga.org

Questions regarding this RFQ will be faxed 706 290-6099 or Email: Graye@floydcountyga.org

Quotes are to remain valid for a period of 30 days from the date of quote.

Typically award notification will be by email. Tabulations will be posted to the Floyd County Website and the Georgia Procurement Registry in approximately 24hrs after the due date/time.

Payment Options, Invoicing, and Terms and Conditions

If payment is made by check, Floyd County will pay invoice(s) within 30 days of receipt of a valid invoice. Supplier may be required to send a current W-9 prior to have a Purchase Order issued. The Issued purchase Order will serve as to initiate the order when payment is by check.

If payment is made by credit card this information will be provided at the time of order, however, the successful suppliers must agree that no charge will be run until such time as the products have shipped. A paid receipt or paid invoice will be provided to the card bearer.

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EVERETT GRAY, CPPB, PURCHASING AGENT

Floyd County Quote Page
RFQ 15-0212 Variable Speed Drive
Quote Due not later than 2pm 12 Feb 2015

Specifications: MODEL TEC A510-4075-CS VHD, 460V, 75HP, 3PH, 118Amp, LCD, Chassis

Suppliers may submit comparative makes or models that are similar in quality, design, capacity, and operation.

Make _____ Model _____ Price: _____

If submitting an alternate model attach model specifications to this quote

Delivery time from order placement (Calendar days) _____

Installation: WILL NOT be required. This quote is for supplying only

Delivery information. Successful Supplier will make delivery to Facilities Department, 12 East Fourth Ave, Suite 110, Rome Ga. 30161

We the undersigned agree to furnish and deliver the below listed item(s) in accordance with the specifications and terms and conditions issued for the same.

Contact Person: _____ (Print or Type Name)

Telephone Number(s): __P_____ F_____ C_____

Email Address _____

Company Name _____

Billing Address _____

Signature _____ Date _____

Specify Preferred Payment Method

_____ **Check** - Paid within 30 days of invoice - Supplier is requested to provide current W-9

_____ **Credit Card** – Will be provided at shipment with no transaction fee