## **Quote Request**

Carpet Replacement PA Bidwell - Office Rebid

#### **Quotes due November 18, 2016 @ 2:00 pm**

Fax to Debbie Norkevicus at (412) 456-5007

### **Scope of Work**

Contractor will furnish and install carpeting in the following areas: Management Office

- Remove existing cove base
- Lift existing carpet and pad and haul away
- Furnish and install new carpet and pad
  - **Style:** Graphic Loop, industrial
  - ❖ Color: Black Diamond, Mainstreet by Philadelphia (or equivalent)
- Furnish and install new Johnsonsite (or equivalent) cove base
  - Color: Dark Gray
- All measurements are estimates and Vendor will be require to measure for exact measurements.
- New Doorway trims
- All work areas will be left neat and clean at the end of each work day.
- No debris to be place in HACP trash receptacles.
- Contractor is responsible for obtaining all required permits.

Additionally, HACP does not believe there are any hazardous materials present at this site. If contractor suspects any hazardous materials it should be brought to HACP's attention.

Site visit will be November 14 @ 2:00 PM at PA Bidwell Management Office, 1014 Sheffield Street, Pittsburgh, PA 15233

Please contact Debbie Norkevicus at 412-456-5000 ext. 8505 or at Debbie.Norkevicus@HACP.org with any questions about the above scope.

# **Quote Request**

Quotes due 11/18/16 @ 2:00 p.m.

#### Contract award will be based on lowest total bid amount

| Total Bid Amount:          | \$                     |  |
|----------------------------|------------------------|--|
|                            |                        |  |
| Total Bid Amount in words: | \$                     |  |
|                            |                        |  |
|                            |                        |  |
|                            | (Please print clearly) |  |
| Company Name:              |                        |  |
| Address:                   |                        |  |
|                            | (of company)           |  |
| Signature:                 | <del></del>            |  |
| Print Name:                |                        |  |
|                            | (of person signing)    |  |
| Phone Number:              | Fax:                   |  |
| Email:                     |                        |  |