

**South Carolina Department of Mental Health  
Physical Plant Services**

**Request for Quotes**

<b>Project Name:</b>	<u>Crafts Farrow Building 15 Asbestos Abatement</u>		
<b>Project No. J12-</b>	<u>N/A</u>	<b>Work Order #:</b>	<u>N/A</u>
<b>PPS Proj Coordinator:</b>	<u>Ray Nanney</u>	<b>Phone #:</b>	<u>803-935-5633</u>

**Scope of Work:**

Provide equipment & labor to perform abatement of asbestos containing materials in Building 15 located on the Crafts Farrow Campus 7901 Farrow Rd Columbia, SC 29203. All asbestos to be removed according to SC DHEC Regulations. Asbestos Abatement Plan from S&ME is attached. All required OSHA safety and enviromental regulations shall be followed.

Delivery Order Documents (Plans/Specs/SOW) Available:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
May Be Obtained From:	<u>Randy Carver david.carver@scdmh.org</u>	

Liquidated Damages are applicable:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Amount of LDs per day:	<u>\$ 200</u>	Days Allowed: <u>90</u>

Pre-Quote Conference:	Mandatory:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Date: <u>2/9/21</u>	Time: <u>2:00 PM</u>	Location: <u>Building 15 Crafts Farrow Campus</u> <u>7901 Farrow Rd. Columbia, SC 29203</u>	

RFQ Closing Date: <u>2/23/21</u>	Time: <u>2:00 PM</u>
Location: <u>Regular mail or drop off.</u>	Attention: <u>Ray Nanney - Building 4 7901 Farrow Rd.</u> <u>Columbia, SC 29203</u>

**Note: If quote exceeds \$50,000, Performance & Payment Bonds will be required.**

**QUOTE FORM**

Quote Submitted By (Offeror's Name):	_____
Base Quote 1:	\$ _____
Base Quote 2:	\$ <u>N/A</u>
<input type="checkbox"/>	At this time, the above mentioned company chooses not to bid.

ADDENDA (If Applicable) Receipt acknowledged for the following addenda for this RFQ:			
Addendum #1 <input type="checkbox"/>	Addendum #2 <input type="checkbox"/>	Addendum #3 <input type="checkbox"/>	Addendum #4 <input type="checkbox"/>

This Quote is hereby submitted on behalf of the Offeror named above.	
BY: _____	_____
(Signature of Offeror's Representative)	(Print or Type Name of Offeror's Representative)
Date: _____	Bid is Valid for ___ Days