

**Proposal Tabulation Sheet**

Please fill out the Tabulation Sheet completely and sign

Vendor Name \_\_\_\_\_

Address \_\_\_\_\_

Primary Contact \_\_\_\_\_ Contact Phone \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Please provide total NET PRICING for the below options specified including; but not limited to shipping, operator and maintenance training, warranty services and applicable SC taxes and certification/documentation.

**Item 1 (86) New SCBA complete. (1) SCBA complete for purposes of this RFP includes; a back pack and harness assembly, all required regulators, hoses, valves and alarms; no cylinders or face pieces are to be included in this category**

Total Net cost \_\_\_\_\_

**Item 2 (6) Rapid Intervention Crew configured SCBA. (1) Rapid Intervention Crew SCBA for purposes of this RFP include; a back pack and harness assembly, all required regulators, hoses, valves and alarms, no cylinders or face pieces are to be included in this category.**

Total Net cost \_\_\_\_\_

**Item 3 (10) 30 Minute 4500 psig SCBA Cylinders**

Total Net cost \_\_\_\_\_

**Item 4 (10) 30 Minute 5500 psig SCBA Cylinders ILO 4500 psig**

Total Net cost \_\_\_\_\_

**Item 5 (22) 60 Minute 4500 psig SCBA Cylinders**

Total Net cost \_\_\_\_\_

**Item 6 (22) 60 Minute 5500 psig SCBA Cylinders ILO 4500 psig**

Total Net cost \_\_\_\_\_

**Item 7 (156) 45 Minute 4500 psig SCBA Cylinders**

Total Net cost \_\_\_\_\_

**Item 8 (156) 45 Minute 5500 psig SCBA Cylinders ILO 4500 psig**

Total Net cost \_\_\_\_\_

**Item 9 (12) 76 Minute 4500 psig SCBA Cylinders**

Total Net cost \_\_\_\_\_

**Item 10 (12) 76 Minute 5500 psig SCBA Cylinders ILO 4500 psig**

Total Net cost \_\_\_\_\_

**Item 11 (136) Face Pieces**

Total Net cost \_\_\_\_\_

**Item 12 Personnel Accountability System Each**

Total Net cost \_\_\_\_\_

**Item 13 Pack Tracker/ Geographical Locator Each**

Total Net cost \_\_\_\_\_

**Item 14 Warranty, Service, required Tools, and Training**

Total Net cost \_\_\_\_\_

**Trade in value of the Towns current inventory of SCBA's face pieces, cylinders, spare parts. See exhibit 2 for specific quantities and condition.**

Total Net credit \_\_\_\_\_

**References** Provide 3 references of similar entities that the vendor has provided the requested services for. Valid points of contact including phone number shall be included below.

Contact Name	Contact Phone Number	Contact Place of Business
_____	_____	_____
_____	_____	_____
_____	_____	_____