## STATE OF NEW JERSEY DEPARTMENT OF THETREASURY

## AGENCY REQUEST FOR PROPOSAL

VENDOR NAME AND ADDRESS:  SBE CATEGORY: N/A  NOTE: This proposal form must be received by 2:00 p.m. December 12, 2024 at DOT-EMS_BID.Procurement@dot.nj.gov		RETURN THIS PROPOSAL TO: DOT-EMS_BID.Procurement@dot.nj.gov  FAX NUMBER: N/A  AGENCY PERSON TO CONTACT:		DELIVER TO:  NJ Department of Transportation Procurement Division Bureau of Equipment, Materials & Supplies 1035 Parkway Avenue Trenton, NJ 08625	
		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
Forklift  NJDOT Bordentown Training Facility 391 Route 130 Building 3 Bordentown, NJ 08505	1	Each	See attached Request For Quote (RFQ) for details		
Freight	0	Each			
Bidder may supply their own quote; total price for all aspects of this bid on this PB-120 form.	however, the must appear				
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:	