

ODOT PUBLIC TRANSIT EQUIPMENT PURCHASE SELECTION FORM

Agency Name:		Contact Person:		
Grant Agreement No.	Date:	Phone No.		
<u>Equipment Description & Quantity To Be Purchased:</u>				
Procurement Rationale:				
<u>Procurement Method:</u> <input type="checkbox"/> Oregon State Price Agreement Contract <input type="checkbox"/> Piggyback on Other Existing Contract: _____ <input type="checkbox"/> Under \$150,000 - Local Procurement Procedures/RFP <input type="checkbox"/> Over \$150,000 - Formal RFP or Sealed Bids Required <input type="checkbox"/> Other (explain) <i>At least 3 bids required</i>				
Required Specifications: (describe here or attach list)				
Additional Preferred Options or Installation & Training: (describe here or attach list)				
VENDOR Equipment Quotes	Vendor:	Vendor:	Vendor:	Vendor:
Equipment/System Proposed in Response to Price Quotes (briefly describe):				
Equipment Base Pricing:				
Vendor Product Selected:	<input type="checkbox"/> Selected <input type="checkbox"/> Not Selected	<input type="checkbox"/> Selected <input type="checkbox"/> Not Selected	<input type="checkbox"/> Selected <input type="checkbox"/> Not Selected	<input type="checkbox"/> Selected <input type="checkbox"/> Not Selected
Rationale for Product Selected (explain here or attach statement):				
Agency Representative Name & Signature:				Date: