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# APPENDIX B - PROPOSAL FORM

**WSIPC RFP 24-01 Student Safety Solutions**

TO: WSIPC

Cynthia Gefeller, Contract Administrator

2121 W. Casino Road

Everett, Washington 98204-1472

RE: RFP No. 24-01

In response to your RFP, the undersigned offers to furnish all of the Goods and Services described in the Technical Specifications in accordance with the Contract Documents and any Addenda thereto and for the prices and in accordance with the delivery schedule set forth in the attached Schedule of Prices.

By submitting a Proposal, the undersigned certifies and agrees that:

* 1. The undersigned has examined to its satisfaction, and is fully familiar with and understands all provisions of the Contract Documents and any Addenda.

* 1. All of the words and figures shown in the attached response are accurate;
  2. All statements in this Proposal are true and accurate;
  3. By careful examination of the Contract and proposal documents, all Addenda thereto and all other pertinent conditions and matters, the undersigned has satisfied itself as to the nature, location, character, quality and quantity of the Goods and Services required by the Contract Documents and the conditions and other matters that may affect performance.
  4. If awarded the Contract, the undersigned will duly execute and deliver to WSIPC the Contract, together with all documents required by the proposal documents, within ten (10) business days after it is presented to the undersigned by WSIPC.
  5. WSIPC has no obligation to accept any proposal submitted in response to the RFP and may reject any or all such Proposals (including, without limitation, the undersigned’s Proposal) or waive any informalities or irregularities in any proposal or the proposal process.

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| --- | --- | --- |
| **Legal Name of Proposer:** |  |  |
| **Business Address:** |  |  |
|  |  |  |
| **Phone:** |  |  |
| **Street Address:** |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Signature of Corporation** | | |
| **Company/Corporate Legal Name:** |  |  |
| **State of Incorporation:** |  |  |
| **By:** |  |  |
|  |  | *(Signature)* |
| **Name:** |  |  |
|  |  | *(Printed)* |
| **Title:** |  |  |
| **Date Signed:** |  |  |
|  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Representative Acknowledgement** | | | | | | |
| **I,** |  | | **, stated on oath that I am authorized** | | | |
| **to sign the document presented and I am the** | | | |  | |
|  | | | | *(Type of Authority)* | |
| **of** |  | | | |  |
|  | *(Name of Party on Behalf of Whom Document is Executed)* | | | | | |
| **Additional Information:** | | |  | | | |
|  | | | | | | |

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| --- | --- | --- | --- |
| **Signature of Individuals, Partnership, or Joint Venture**  **Name of Partnership or Joint Venture, if applicable:** | | | |
|  | | | |
| **By** (all partners or joint ventures): | | | |
|  |  | **Date Signed:** |  |
|  |  | **Date Signed:** |  |
|  |  | **Date Signed:** |  |
|  |  | **Date Signed:** |  |