

**Exhibit A Pricing Form**  
ATOD Racking Modification  
1918 SE Hulsizer Dr, Ankeny, Iowa 50021  
Request for Quote RFQ949200-01

**Due Thursday, October 23<sup>rd</sup> at 02:00 PM (CT)**

Please submit this completed form with your Quote to:

[Iowa IMPACS Procurement System](https://bids.sciquest.com/apps/Router/PublicEvent?CustomerOrg=DASlowa)

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This form is to be completed in ink or typewritten.

Only pricing on this form or an exact copy of this form will be accepted.

Pricing Form shall be signed by an officer of the firm with authority to bind Respondent to Contract.

Respondent acknowledges receipt of the following Addenda (if issued) which are part of the RFQ documents:

Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

Freight Terms: FOB Destination, Freight Pre-Paid

The State reserves the right to reject any or all quotes without penalty and to waive minor deficiencies and informalities if, in the judgement of the State, it's best interests will be served.

Respondents must submit pricing for all scope of work items indicated per the attached Exhibit B. The State reserves the right to evaluate pricing. The State intends to make one Award for this project.

**QP #01 – Lump Sum Price for all racking modifications, labor, additional materials, potential design requirements and any necessary repairs associated with the ATOD Racking Modification project.**

Lump Sum (Labor and Material(s)) Total \$ \_\_\_\_\_

\*Please note all pricing is to be delivered price. That is why we are stating FOB Destination, Freight Pre-Paid.\*

Signature \_\_\_\_\_

Name (Print) \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, St., Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail \_\_\_\_\_