

REQUEST for ARMORED CAR SERVICES

IFB-17-010-O; SPO PL Contract No. 17-13

For Agency Use

Agency hereby submits the following request for services.

Submitted by: _____
Phone No.: _____
Date to begin services: _____

For Contractor Use

Contractor hereby accepts Agency's request for services effective the Date stated, or as amended.

Signature: _____
Print Name: _____

PICK-UP FROM:

Department: _____
Division/Branch: _____
Street Address: _____
Room/Suite: _____
Building: _____
City/Zip/Island: _____
Contact Person: _____
Phone Number: _____

INVOICE ADDRESS:

DAYS REQUESTING PICK-UP (check all that apply):

- | | |
|--|-----------------------------|
| <input type="checkbox"/> Sunday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Monday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Tuesday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Wednesday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Thursday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Friday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Saturday | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Holidays | Approx. Pick-up Time: _____ |
| <input type="checkbox"/> Agency will contact vendor for furlough day/holiday pick up | |
| <input type="checkbox"/> Other (specify): _____ | |

Special Instructions: _____

FOR WHICH DAY DELIVERY:

- | | |
|--|------------------------|
| <input type="checkbox"/> Same Day Delivery | Deliver-by Time: _____ |
| <input type="checkbox"/> Next Day Delivery | Deliver-by Time: _____ |
| <input type="checkbox"/> Next day only if too late for same day delivery | Deliver-by Time: _____ |
| <input type="checkbox"/> Other (specify): _____ | Deliver-by Time: _____ |

DELIVER TO:

Bank: _____
Location/Branch: _____
Other (specify): _____
location: _____
street: _____
room/suite: _____
city/zip/island: _____
contact person (if applicable): _____
phone number (if applicable): _____

TYPES OF ITEMS:

Types of items to be delivered: _____

Agency - Submit completed form to Contractor. Contractor - Once request approved/accepted, sign. Copy to agency.