



**CITY OF SUGAR LAND**

**PURCHASING OFFICE**

**QUOTE NO. 2010-14**

**CUSTOM-BUILT IN DESK, PARTITIONS AND CARGO SLIDE FOR SPRINTER VAN**

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**ISSUED BY:**

City of Sugar Land  
P. O. Box 110  
Sugar Land, TX 77487

**FAX QUOTES TO:**

Purchasing Office  
Attn: Jennifer Chiu  
(281) 275-2741

The City of Sugar Land is seeking quotes for **custom-built in desk, partitions and cargo slide for Year 2009, Freightliner Sprinter Van 2500 High Roof 170" wheel base, model F2CA170EX**. The City of Sugar Land is aware of the time and effort you expend in preparing and submitting quotes to the City. Please let us know of any requirements that are causing you difficulty in responding to our quotes. We want to make the process as convenient as possible so that all responsible vendors can compete for the City's business.

Please note that all the quotes **must be received by 4:00 PM, CST, on Monday, January 25, 2010**. Quotes received after designated deadline will not be considered. Quote must be provided on the form provided. Quotes must be signed and dated by the vendor's authorized representative.

**QUOTE NO. 2010-14  
CUSTOM-BUILT IN DESK AND PARTITIONS FOR 2500 SPRINTER VAN**

**BIDDER CERTIFICATION**

By signature affixed, the bidder certifies that neither the bidder nor the firm, corporation, partnership, or institution represented by the bidder, or anyone acting for such firm, corporation, or institution has violated the anti-trust laws of this State, codified in Section 15.01, et seq., Texas Business and Commerce Code, or the Federal antitrust laws, nor communicated directly or indirectly the bid made to any competitor or any other person engaged in such line of business.

Bidder has examined the specifications and has fully informed themselves as to all terms and conditions. Any discrepancies or omissions from the specifications or other documents have been clarified with City representatives and noted on the bid submitted.

Bidder guarantees services offered will meet or exceed specifications identified in this Request for Quote.

NAME OF FIRM/COMPANY: \_\_\_\_\_

AGENTS NAME: \_\_\_\_\_

AGENTS TITLE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE & FAX NUMBERS: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

DATE OF QUOTE: \_\_\_\_\_

**DESCRIPTION OF VEHICLE**

**Year 2009—Freightliner Sprinter Van, 2500 High Roof, 170” Wheel Base**

<b>Description</b>	<b>Dimension in Inches</b>
Turning Diameter (FT)	54.6
Ground to Sliding Door Step – Side	19.9
Load Height – Rear	27.4
Door Opening – Side	71.7
Door Opening – Rear	72.4
Door Width – Side	51.2
Door Width – Rear	61.6
Cargo Bed Length	169.3
Cargo Width at Wheelhouse	53.1
Maximum Width at Floor	70.1
Interior Height	76.4
Cargo Volume (cu ft)	494.0
Maximum Available GVWR (lb)	8,550
Base Curb Weight (lb)	5,267
Maximum Payload (lb)	3,283
Maximum Towing (lb)	5,000
Maximum Available GCWR (lb)	13,550
Fuel Tank Capacity (gal)	25.0

**DESCRIPTION OF WORK**

1. Provide and install weather guard blackhead with hinged door behind driver and passenger seat
2. Provide second weather guard bulkhead with hinged door & modify to fit approximately midway between front bulkhead and rear doors
3. Seal rear bulkhead and door from rear section
4. Install metal desk with 2 side drawers behind front bulkhead
5. Desk to be 29 ½” H x 48” W x 30” D
6. Install Jotto (or equivalent) aluminum cargo/equipment slide assembly in rear section of van for generator mount.
7. The vehicle will be dropped-off at the contractor’s place of business by a designated City of Sugar Land employee, and be picked-up by a designated City employee after completion of work at a mutually agreed schedule and location.

**Additional Comments/Description of Work:**

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**ESTIMATED TIME OF COMPLETION  
(From time of notice to proceed)**

\_\_\_\_\_ **DAYS**

**GRAND TOTAL (PARTS & LABOR)**

\$ \_\_\_\_\_

**BIDDER CUSTOMER / CLIENT REFERENCES**

1. COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP: \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME OF CONTACT: \_\_\_\_\_

2. COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP: \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME OF CONTACT: \_\_\_\_\_

3. COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP: \_\_\_\_\_

PHONE NO. \_\_\_\_\_

NAME OF CONTACT: \_\_\_\_\_