

Cost Comparison Estimate Worksheet

Vendor Name _____
 Contact Information: _____

Package Submission Date: _____

A. Project Location and Type:

DGS Project Number: _____
 Agency Name: _____
 Project Address: _____

 Project Type: _____

B. Project Cost:

Workstation Type:	Quantity:	Cost per station:	Total Cost:
<i>Sample: Type A - 64 s.f.</i>	<i>20</i>	<i>\$4,560</i>	<i>\$91,200</i>

Project Total Estimated Cost: _____

C. Check if the following documents are attached to this form.

- Typical Workstation Layouts by type
- List of typical components and fabric grade
- Parts lists for each workstation type (list costs, customer discount rate and cost, and tax shown separately and ten totaled)
- Warranty Information
- Variance justification if applicable
- Project Schedule
- Additional Information as applicable

This form has been reviewed for completeness and to the best of my knowledge is fully accurate.

 Vendor Representative

DGS Use Only

Reviewed By:

Date

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