

RFI FORM

Contractor Name:

Address:

Phone/Fax:

Send to: cecil.nichols@va.gov

RFI (REQUEST FOR INFORMATION)			
PROJECT NO.:		RFI NO.:	001
PROJECT NAME:	RESTORE Laboratory from Fire Damages, Bldg 304 Rm E1-115	DATE REQUESTED:	xx/xx/2017
SOLICITATION NO.:	VA262-17-Q-1744	REFERENCE:	
DRAWING:		SPECIFICATION SECTION:	
DESCRIPTION OF PROBLEM OR INFORMATION BEING REQUESTED			
Please be specific as possible:			
PROJECT MANAGER'S RESPONSE			
TRACKING NO.:		AMENDMENT NO.:	
VA PROJECT ENGINEER/MANAGER:		DATE:	