

Request For Information (RFI)

Questionnaire

Please answer the questions below:

- 1 Are you, as the owner and your technicians, certified (have the required license & Permit) to perform inspections on elevators in State of WY or Utah?

(Please select which location you are certified to perform elevator inspections?)

442-VA Medical Center (VAMC)
2360 East Pershing Blvd.
Cheyenne, WY 82801-8322

666-VA Medical Center
1898 Fort Road
Sheridan, WY 82148-0001

660-VA Medical Center (VAMC)
500 Foot hill Blvd.
Salt Lake City, UT 84148-0001

- 1(a). Please list the name and type of certification, your company possesses for performing elevator inspections in the space below:

1(b). Please provide name of Institution(s) were these certificate were obtain from in the space below:

1 (c) Is this Institution(s) still in business?

- 2 what is the average years of experience (including self) combine, does your company have in the elevator inspection business?***(Please select One)***

- 6 What is your Socieconomic Status? ***(Please select all that apply)***

First Status? Second Status? Additional Status?

- A. Company Name
- B DUNS#
- C POC
- D POC email
- E POC phone #

DATE

Does your company has a GSA schedule for this type service (Please select one)
If "YES" please list your GSA # in space below

DISCLAIMER

This RFI is issued solely for information and planning purposes only and does not constitute a solicitation. All information received in response to this RFI that is marked as proprietary will be handled accordingly. In accordance with FAR 15.201(e), responses to this notice are not offers and cannot be accepted by the Government to form a binding contract. Responders are solely responsible for all expenses associated with responding to this RFI.