ATTACHMENT I: COST PROPOSAL FORM

Davis Bacon Consultant Services (Discretionary)

Proposer/Firm Name:	

INSTRUCTIONS:

1.All-Inclusive Rates:
Hourly Rates must be all-inclusive (covering overhead, profit, administrative costs, travel, etc.).

2.Rate Locks:
Years 1 & 2:The Hourly Rates proposed for Year 1 must remain the same for Year 2.
Years 3 & (optional) 4: The Hourly Rates proposed for Year 3 must remain the same for Optional Year 4.

3.Quarterly Caps:
You must provide a "Not-to Exceed" (NTE) amount for each quarter.

SECTION 1: HOURLY RATES BY TITLE

List the specific Job Titles/Classifications you will assign to this contract and the associated hourly rate.

Staff Title / Classification	Year 1 Rate	Year 2 Rate	Year 3 Rate	Year 4 (optional year)	Year 5 (optional year)
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -
[STAFF TITLE]	$ -	$ -	$ -	$ -	$ -

SECTION 2: QUARTERLY NOT-TO-EXCEED (NTE) CAPS

Indicate the maximum amount your firm will bill per quarter for all services combined (including all four Regions).

Contract Year	Quarterly Not-To-Exceed Amount	Estimated Annual Total(Quarterly Amt x 4)
Year 1	$ -	$ -
Year 2	$ -	$ -
Year 3	$ -	$ -
SUBTOTAL for YEARS 1 - 3	$ -	
Year 4 (optional year)	$ -	$ -
Year 5 (optional year)	$ -	$ -
GRAND TOTAL BID	$ -	

CERTIFICATION	
Authorized Signatory Name and Title:	
Signature:	
Date:	