

This form should be completed and returned to

*City of Olean DPW Office
101 East State Street
P.O. Box 668
Room 206
Olean, NY 14760*

Please direct any questions to 716-376-5650.

CITY OF OLEAN D.P.W.
FORM OF PROPOSAL

The undersigned hereby proposes to furnish the following items/services to the City of Olean per proposal request:

Total price, including freight: \$ _____

CITY OF OLEAN IS TAX EXEMPT, FED ID #16-6002550.

AUTHORIZED SIGNATURE: _____

OFFICIAL TITLE: _____

COMPANY NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

DATED: _____