

BACTS
CONSULTANT'S DETAILED COST PROPOSAL FORM

Consultant Name:
 Vendor/Customer No.:
 Project Title/Location:
 Service Area or Phase of Work:

Orig. Date:
 Revised Date:
 Contact Name:
 Contact e-mail address:

Consultant Positions =>

#	Task Descriptions	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	Classification and/or Employee Name <i>Hours</i>	TOTAL <i>Hours</i>			
1											0.00			
2											0.00			
3											0.00			
4											0.00			
5											0.00			
6											0.00			
7											0.00			
8											0.00			
9											0.00			
10											0.00			
11											0.00			
12											0.00			
13											0.00			
14											0.00			
15											0.00			
16											0.00			
17											0.00			
18											0.00			
19											0.00			
20											0.00			
21											0.00			
TOTAL HOURS		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
HOURLY RATE		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				
DIRECT LABOR TOTAL		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
DIRECT EXPENSES														
Subconsultant 1-List Name		\$0.00										Overhead %	0.00%	\$0.00
Subconsultant 2-List Name		\$0.00										Profit/Fee %	0.00%	\$0.00
Mileage (currently \$.44 per mile)		\$0.00										Subtotal =		\$0.00
Postage		\$0.00										Total Direct Expenses =		\$0.00
Printing		\$0.00												
Other		\$0.00										Total Proposed Cost		\$0.00
Other		\$0.00												
TOTAL DIRECT EXPENSES =		\$0.00												

NOTE: This proposal form must be accompanied by: (a) Description of Services; (b) Scope of Work; (c) DBE form; (d) Appendix A-1; (e) Certified Payroll; (f) Insurance Certificates; and (g) Subconsultant Proposal.

Total Proposed Cost **\$0.00**