STATE OF NEW JERSEY

DEPARTMENT OF THE TREASURY

AGENCY REQUEST FOR PROPOSAL

VENDOR NAME AND ADDRESS:		**RETURN THIS PROPOSAL TO:** DOT-EMS_BID.Procurement@dot.nj.gov		**DELIVER TO:** NJ Department of Transportation Procurement Division Bureau of Equipment, Materials & Supplies 1035 Parkway Avenue Trenton, NJ 08625
SBE CATEGORY: N/A		**FAX NUMBER:** N/A		
NOTE: **This proposal form must be received by 10:00 a.m. September 17th, 2025** at DOT-EMS_BID.Procurement@dot.nj.gov		**AGENCY PERSON TO CONTACT:** Nikki Ghorbani		
FISCAL YEAR: 2026	**ACCOUNT NUMBER:** **N/A**	**AGENCY REFERENCE NUMBER:**		**COMMODITY NUMBER:**

ITEM DESCRIPTION	QUANTITY	UNIT	DESCRIPTION (ALL ITEMS MUST BE DELIVERED F.O.B. DESTINATION)	UNIT PRICE	TOTAL AMOUNT
Analytical Balance Mettler Chemical and Cement Lab	6	Each	See attached Request For Quote (RFQ) for details		
Precision Balance Chemical and Cement Lab	4	Each	See attached Request For Quote (RFQ) for details		
35 kg Scale Soils and Aggregate Lab	4	Each	See attached Request For Quote (RFQ) for details		
Precision Balance Soils and Aggregate Lab	1	Each	See attached Request For Quote (RFQ) for details		
Ohaus EX12001 North Region	2	Each	See attached Request For Quote (RFQ) for details		
Ohaus EX35001 North Region	1	Each	See attached Request For Quote (RFQ) for details		
Bidder may supply their own quote; however, the total price for all aspects of this bid must appear on this PB-120 form.					
PRICES ARE FIRM UNTIL THE FOLLOWING DATE:				**TOTAL:**	

CASH DISCOUNT:	**DATE OF DELIVERY:**	**VENDOR'S FEDERAL I.D. NUMBER:**	**VENDOR'S TELEPHONE NUMBER:**
VENDOR'S SIGNATURE (Must be Signed):		**PRINT OR TYPE NAME BELOW:**	**DATE:**