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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------|
| SOLICITATION, OFFER AND AWARD | | 1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) | RATING | PAGE OF PAGES 1 813 | |
| 2. CONTRACT NUMBER | | 3. SOLICITATION NUMBER 89303319REM000044 | 4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input checked="" type="checkbox"/> NEGOTIATED (RFP) | 5. DATE ISSUED 02/14/2019 | 6. REQUISITION/PURCHASE NUMBER |
| 7. ISSUED BY EM -Environmental Mgmt Con Bus Ctr EMCBC U.S. Department of Energy EM Consolidated Business Center 250 E. 5th Street, Suite 500 Cincinnati OH 45202 | | CODE 893033 | 8. ADDRESS OFFER TO (If other than Item 7) See Section L.8(c) | | |

NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder".

SOLICITATION

9. Sealed offers in original and See Section L.8(c) copies for furnishing the supplies or services in the Schedule will be received at the place specified in Item 8, or if hand carried, in the depository located in _____ until 1700 ET local time 03/18/2019
(Hour) (Date)

CAUTION: LATE Submissions, Modifications, and Withdrawals: See Section L, Provision No. 52.214-7 or 52.215-1. All offers are subject to all terms and conditions contained in this solicitation.

| | | | | | |
|----------------------------------|--------------------------------|---------------------------------|------|--------------------------------|-------------------|
| 10. FOR INFORMATION CALL: | A. NAME George F. Champlain | B. TELEPHONE (NO COLLECT CALLS) | | | C. E-MAIL ADDRESS |
| | AREA CODE 509 | NUMBER 376-6678 | EXT. | george_f_champlain@orp.doe.gov | |

11. TABLE OF CONTENTS

| (X) | SEC. | DESCRIPTION | PAGE(S) | (X) | SEC. | DESCRIPTION | PAGE(S) |
|-------------------------------------|------|---------------------------------------|---------|----------------------------------------------------------|------|------------------------------------------------------------------|---------|
| PART I - THE SCHEDULE | | | | PART II - CONTRACT CLAUSES | | | |
| <input checked="" type="checkbox"/> | A | SOLICITATION/CONTRACT FORM | 2 | <input checked="" type="checkbox"/> | I | CONTRACT CLAUSES | 27 |
| <input checked="" type="checkbox"/> | B | SUPPLIES OR SERVICES AND PRICES/COSTS | 18 | PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH. | | | |
| <input checked="" type="checkbox"/> | C | DESCRIPTION/SPECS./WORK STATEMENT | 63 | <input checked="" type="checkbox"/> | J | LIST OF ATTACHMENTS | 399 |
| <input checked="" type="checkbox"/> | D | PACKAGING AND MARKING | 6 | PART IV - REPRESENTATIONS AND INSTRUCTIONS | | | |
| <input checked="" type="checkbox"/> | E | INSPECTION AND ACCEPTANCE | 8 | <input checked="" type="checkbox"/> | K | REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS | 16 |
| <input checked="" type="checkbox"/> | F | DELIVERIES OR PERFORMANCE | 6 | <input checked="" type="checkbox"/> | L | INSTRS., CONDS., AND NOTICES TO OFFERORS | 167 |
| <input checked="" type="checkbox"/> | G | CONTRACT ADMINISTRATION DATA | 12 | <input checked="" type="checkbox"/> | M | EVALUATION FACTORS FOR AWARD | 12 |
| <input checked="" type="checkbox"/> | H | SPECIAL CONTRACT REQUIREMENTS | 77 | | | | |

OFFER (Must be fully completed by offeror)

NOTE: Item 12 does not apply if the solicitation includes the provisions at 52.214-16, Minimum Bid Acceptance Period.

12. In compliance with the above, the undersigned agrees, if this offer is accepted within _____ calendar days (60 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the price set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

| | | | | |
|-------------------------------------------------------------------------|----------------------|----------------------|----------------------|-------------------|
| 13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52.232.8) | 10 CALENDAR DAYS (%) | 20 CALENDAR DAYS (%) | 30 CALENDAR DAYS (%) | CALENDAR DAYS (%) |
|-------------------------------------------------------------------------|----------------------|----------------------|----------------------|-------------------|

| | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------|---------------|------|
| 14. ACKNOWLEDGEMENT OF AMENDMENTS (The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated): | AMENDMENT NO. | DATE | AMENDMENT NO. | DATE |
| | | | | |

| | | | | | |
|----------------------------------|------|----------|--------------------------------------------------------------------------|--|--|
| 15A. NAME AND ADDRESS OF OFFEROR | CODE | FACILITY | 16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print) | | |
|----------------------------------|------|----------|--------------------------------------------------------------------------|--|--|

| | | | |
|-----------------------|--------------------------------------------------------------------------------------------|---------------|----------------|
| 15B. TELEPHONE NUMBER | 15C. CHECK IF REMITTANCE ADDRESS IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS IN SCHEDULE. | 17. SIGNATURE | 18. OFFER DATE |
| AREA CODE NUMBER EXT. | <input type="checkbox"/> | | |

AWARD (To be completed by government)

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------------------------|----------------|
| 19. ACCEPTED AS TO ITEMS NUMBERED | 20. AMOUNT | 21. ACCOUNTING AND APPROPRIATION | |
| 22. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304 (c) () <input type="checkbox"/> 41 U.S.C. 253 (c) () | | 23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified) | ITEM |
| 24. ADMINISTERED BY (If other than Item 7) | CODE | 25. PAYMENT WILL BE MADE BY | CODE |
| 26. NAME OF CONTRACTING OFFICER (Type or print) Aaron W. Deckard | | 27. UNITED STATES OF AMERICA (Signature of Contracting Officer) | 28. AWARD DATE |

IMPORTANT - Award will be made on this Form, or on Standard Form 26, or by other authorized official written notice.
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CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
89303319REM000044

PAGE 2 OF 813

NAME OF OFFEROR OR CONTRACTOR

| ITEM NO. (A) | SUPPLIES/SERVICES (B) | QUANTITY (C) | UNIT (D) | UNIT PRICE (E) | AMOUNT (F) |
|-----------------|------------------------------------|-----------------|-------------|-------------------|---------------|
| 00001 | FOB: Destination End States | | | | |