REQUEST FOR QUOTATION
(THIS IS NOT AN ORDER)

THIS RFQ ☐ IS ☒ IS NOT A SMALL BUSINESS SET-ASIDE

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1. REQUEST NUMBER	2. DATE ISSUED	3. REQUISITION/PURCHASE REQUEST NUMBER	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
70Z02426Q0000166	08/05/2026	31120PR260000166		

5a. ISSUED BY
RST 1, USCG BASE BOSTON, 427 COMMERCIAL ST., BOSTON, MA 02109-1027

6. DELIVER BY *(Date)*
09/19/2026

5b. FOR INFORMATION CALL *(NO COLLECT CALLS)*

NAME	TELEPHONE NUMBER	
	AREA CODE	NUMBER
BEVERLY A. PRIMM	571	610-0476

7. DELIVERY
☒ FOB DESTINATION ☐ OTHER *(See Schedule)*

9. DESTINATION
a. NAME OF CONSIGNEE
USCG BASE BOSTON
b. STREET ADDRESS
427 COMMERCIAL ST.
c. CITY
BOSTON
d. STATE MA
e. ZIP CODE 02109-1027

8. TO:

a. NAME	b. COMPANY	c. STREET ADDRESS	d. CITY	e. STATE	f. ZIP CODE

10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS *(Date)*
08/12/2026

IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.

11. SCHEDULE *(Include applicable Federal, State and local taxes)*

ITEM NUMBER (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
00001	Contractor shall furnish all labor, materials, equipment, and supervision necessary to remove and replace the existing motor fan drive shaft bearings (5 each) at USCG Base Boston, Boston, MA 02109-1027 per the attached Scope of Work. Quote should be a firm fixed price quote and should include the lead time for parts. It should also include a detailed quote breakdown. Service Contract Labor Standards FAR 52.222-41 applies. NAICS: 811310 SIZE: $12.5M PSC: J031	01 UEI	JB		

12. DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS NUMBER	PERCENTAGE

NOTE: Additional provisions and representations ☐ are ☐ are not attached.

13. NAME AND ADDRESS OF QUOTER
a. NAME OF QUOTER
b. STREET ADDRESS
c. COUNTY
d. CITY
e. STATE
f. ZIP CODE

14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION

15. DATE OF QUOTATION

16. SIGNER
a. NAME *(Type or print)*
b. TELEPHONE
AREA CODE
NUMBER
c. TITLE *(Type or print)*

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STANDARD FORM 18 (REV. 6/1995)
Prescribed by GSA-FAR (48 CFR) 53.215-1(a)