**APPENDIX C**:

**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

**DEPARTMENT OF ADMINISTRATION**

**ONE CAPITOL HILL, PROVIDENCE, R.I. 02908**

**PROPOSAL OFFER FORM**

Four (4) copies of this offer must be sent under sealed cover clearly marked with Property Number/Name to: **Department of Administration, Division of Purchases, One Capitol Hill, Providence, R.I. 02908** by **March 1, 2021** at **10:00 a.m.,** at which time State offers in response RFP will be publicly acknowledged only. See Request for Proposal **#7611830** for specific conditions and requirements.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Contact Name:** | |  | | | | | | | | | |
| **DBA (if applicable):** | |  | | | | | | | | | |
| **Street Address:** | | |  | | | | | | | | |
| **City** |  | | | | | **State:** |  | | **Zip:** | |  |
| **Phone:** | **(   )    -** | | | **Fax:** | **(   )    -** | | | **Email:** | |  | |
|  | | | | | | | | | | | |

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| --- | --- | --- |
| **PRICE PROPOSAL** | | |
|  | U**Annual**  U**Price Per Acre** | U**Total Annual**  U**Amount** |
| **EXPERIENCE OF OFFEROR**  **Please briefly describe your experience growing and harvesting agricultural products and managing agricultural lands (attach additional sheets as needed).** | | |
|  | | |
| **Check here if you have leased this parcel or other State-owned agricultural lands in the past?**  **List Property Name:** | | |

2B**This offer will not be considered unless signed.**

***3B***

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:\_\_\_\_\_\_\_\_\_\_\_