

PRICE/COST PROPOSAL FORM

Page No. of

Offeror's Name and Address:

~Solicitation Document Number:

Title of Proposed Effort and Task No., Phase No., or Project Total, As Applicable:

Division or Location Where Work is to be Performed

Type of Subcontract:

Select One: New Agreement Modification Letter Subcontract Other (Specify)

Point of Contact:

Period of Performance:

Telephone Number:

Total Amount of Task/Phase No. _____ \$ _____

Proposal Summary Total \$ _____

DETAIL DESCRIPTION OF COST ELEMENTS

1. DIRECT MATERIALS (Attach Itemized Listing for all Purchased Parts, Purchased Items or Services, Raw Materials, Standard Commercial Items, or Interdivisional Transfers at Other than Cost)				Estimated Cost	Total Estimated Price/Cost	Attachment Reference
TOTAL DIRECT MATERIALS						
2. MATERIAL OVERHEAD (Rate x \$ Base)				Estimated Hours	Hourly Rate	Estimated Costs
3. DIRECT LABOR (Specify) -- Additional Sheet May be Used						
TOTAL DIRECT LABOR						
4. LABOR OVERHEAD & FRINGE BENEFITS (Specify Cost Center)				OH Rate	x Base	= Est. Cost
TOTAL LABOR OVERHEAD						
5. EQUIPMENT TO BE PURCHASED OR FABRICATED FOR PROJECT (If a direct cost, include itemized list on separate sheet)						
6. TRAVEL (If a direct cost, include itemized list on separate sheet)						
7. LOWER-TIER SUBCONTRACTORS (Include a similar breakdown on attached sheet or form)						
8. CONSULTANTS (Identify on a separate sheet -- purpose -- rate -- days -- expenses)						
9. OTHER DIRECT COSTS (Identify on a separate sheet)						
10. TOTAL PRICE/COST AND OVERHEAD						
					(Enter Amount)	
11. GENERAL AND ADMINISTRATIVE EXPENSE/INDIRECT EXPENSE (Specify Rate _____ and Cost Element Nos. _____)						
12. Royalties (Provide Required Supporting Documentation)						
13. TOTAL PRICE/COST						
					(Enter Amount)	
14. PROFIT/FEE OR SUBCONTRACTOR'S PRICE/ COST PARTICIPATION (APPLY TO LINE 10)				Rate _____		
15. FACILITIES CAPITAL COST OF MONEY (Provide Required Supporting Documentation)						
16. TOTAL PRICE/COST PROPOSED TO NREL						

PRICE/COST PROPOSAL FORM (CONTINUED)

This price/cost proposal is submitted for use in connection with and in response to *(Describe Solicitation Document)*

and reflects our best price as of this date, in accordance with the Proposal Preparation Instructions to Offerors and the Footnotes and Additional Instructions which follow.

Authorized Official's Typed Name and Title

Signature

Date

Have you been awarded any contracts or subcontracts for the same or similar items within the past three (3) years?
YES NO If yes, identify items(s),customer(s) and subcontract number(s).

What is your organization's fiscal year? From _____(month/day) To _____(month/day)

Has any Executive Agency of the United States Government performed any review (audit) of your accounts or records in connection with any other Government Prime Contract or Subcontract within the past twelve (12) months? Yes (If yes, identify below) No

Name, Address, Phone and E-mail Address of Reviewing Office and Contact