

OFFICE OF FLEET AND ASSET MANAGEMENT  
**RESPONSE CHECK LIST**

Business Name: \_\_\_\_\_

- Check here and attach Vendor Application Form, OFA 50, Attachment B.
- Check here and attach completed and signed Vendor Data Record, STD. 204, Attachment C.
- Check here and attach completed and signed Drug-Free Workplace Certification, STD. 21, Attachment D.
- Check here and attach copy of current Business License.
- Check here and attach copy of current Bureau of Automotive Repair License.
- Check here and attach Certificates of Insurance as required on pages 6 and 7 of this RFQ. This certificate should include:
  - A. **Garagekeepers Legal Liability Insurance**
  - B. **Garage Liability Insurance**
- Check here and attach Certificate of **Standard Workers Compensation and Employers Liability Insurance** as required on page 7 of this RFQ, unless this coverage is noted on the certificate shown above.

Return the response check list and attachments to:

Brian Simas, Statewide Mobile Equipment Coordinator  
Department of General Services  
Office of Fleet and Asset Management  
1700 National Drive  
Sacramento, CA 95834