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:

Phil Guenther, Repair Service Vendor Analyst
Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834