

INTERESTED PROPOSER REGISTRATION FORM

REQUEST FOR PROPOSALS

PSAP CRITICAL UPS SYSTEM REPLACEMENT

RFP NO. FY2021-016-01

To: INTERESTED PROPOSER

Subject: PSAP CRITICAL UPS SYSTEM REPLACEMENT RFP NO.FY2021-016-01

To Proposers:

Please complete the information below to receive a copy of the PSAP CRITICAL UPS SYSTEM REPLACEMENT REQUEST FOR PROPOSALS (RFP). Please notify the UPS Project Team, by e-mail: UPSProject@mchd-tx.org with subject line "RFP NO. FY2021-016-01" as soon as possible with your complete contact information as follows:

Name of INTERESTED PROPOSER: _____

Name of Contact Person: _____

Title of Contact Person: _____

Street Address/Post Office Box: _____

City, State, Zip Code: _____

Telephone Number: _____

Fax Number: _____

E-Mail Address: _____

Website Address: _____

Immediate notification is requested to ensure that every Interested Proposer receives a copy of addenda issued for this REQUEST FOR PROPOSALS.

Thank you for your interest. We look forward to receiving your proposal.

Sincerely,

Melissa Miller

Chief Operating Officer