



# CONSTRUCTION DOCUMENT ORDER FORM

**SSE #:** 0000342524

**SOLICITATION TITLE:** Contract 147459 - Platform Repairs at North White Plains Station

**PRICE OF BID PACKAGE:** \$350

## TO REQUEST DOCUMENTS FOR THIS PROCUREMENT

FILL OUT ALL THE INFORMATION ON THIS FORM. EMAIL IT BACK TO [DOCSALES@NYCT.COM](mailto:DOCSALES@NYCT.COM), FAX IT BACK TO THE NYCT BID RECEPTION DESK AT (646) 252-6108/6109, PICK IT UP IN PERSON, OR MAIL YOUR REQUEST TO: THE NYCT BID RECEPTION DESK, 3 STONE STREET, NY, NY, 10004. HOURS ARE 9:00 AM – 4:00 PM, MONDAY – FRIDAY, EXCLUDING HOLIDAYS. VENDORS OBTAINING BID DOCUMENTS IN PERSON FROM 10:00 AM TO 11:00AM AND 1:30PM TO 2:30PM ON DAYS OF BID OPENINGS MAY BE SUBJECT TO DELAYS. ALL DOCUMENT FEES ARE PAYABLE BY VISA, MASTERCARD, AMERICAN EXPRESS, COMPANY CHECK OR BANK CHECK. MAKE CHECK PAYABLE TO NEW YORK CITY TRANSIT. ALL PAYMENTS ARE NON-REFUNDABLE.

VENDORS MUST PRINT ALL OF THE FOLLOWING INFORMATION WHEN REQUESTING DOCUMENTS.

**COMPANY NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
(PLEASE PROVIDE A STREET ADDRESS A POST OFFICE BOX ADDRESS IS UNACCEPTABLE)

**CONTACT:** \_\_\_\_\_  
(PLEASE ENTER THE NAME OF THE CONTACT FOR THIS PROJECT)

**TITLE:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_  
(PLEASE PRINT THE EMAIL FOR THE ABOVE CONTACT- ADDENDA NOTIFICATIONS WILL BE SENT TO THIS ADDRESS )

**FAX #:** \_\_\_\_\_ **MTA BIDDER/SUPPLIER#:** \_\_\_\_\_  
(we cannot process your order without a bidder/supplier #)

**DUNS #:** \_\_\_\_\_ **TAX ID #/EIN:** \_\_\_\_\_

I AM INTERESTED IN THIS PROJECT AS A: ( ) PRIME CONTRACTOR / ( ) SUB-CONTRACTOR.

YOU MUST BE A REGISTERED VENDOR WITH SYSTEM FOR AWARD MANAGEMENT (SAM) TO PARTICIPATE IN ALL CONSTRUCTION AND ARCHITECTURAL/ENGINEERING PROJECTS.

**SSE#:** 0000342524

**DATE:** \_\_\_\_\_

PLEASE PROVIDE THE FOLLOWING ORDERING INFORMATION.

**COMPANY NAME:** \_\_\_\_\_

**CREDIT CARD:** \_\_\_\_\_ **ACCOUNT #:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_\_