

**ATTACHMENT F, REVISED QUOTE FORM**  
**ITQ NO. 21-R076625, PORTABLE SANITATION SERVICES**

<b>GROUP A</b>					
<b>PORTABLE SANITATION RENTAL UNITS</b>					
<p>The following prices are for the rental of portable sanitation units for specific periods of time: daily, weekly, monthly, and yearly. The Unit Price shall include all fees to furnish, deliver, setup, maintain, service, and remove the portable sanitation units on an as-needed basis, to various County locations, in accordance with all applicable laws, regulations, and ordinances, including but not limited to the Florida Administrative Code 64E.</p>					
<b>Item</b>	<b>Description</b>	<b>U/M</b>	<b>Unit Price</b>	<b>Estimated Qty</b>	<b>Extended Price (Unit Price X Estimated Qty)</b>
1A-1	Daily Rental (24 hours to 4 days), Regular	Day	\$ _____	X 10 =	\$ _____
1A-2	Daily Rental (24 hours to 4 days), Handicapped	Day	\$ _____	X 10 =	\$ _____
2A-1	Daily Rental (24 hours to 4 days), Regular, portable restroom unit with trailer	Day	\$ _____	X 10 =	\$ _____
2A-2	Daily Rental (24 hours to 4 days), Regular, portable restroom trailer	Day	\$ _____	X 10 =	\$ _____
2A-3	Daily Rental (24 hours to 4 days), Handicapped, portable restroom unit with trailer	Day	\$ _____	X 10 =	\$ _____
2A-4	Daily Rental (24 hours to 4 days), Handicapped, portable restroom trailer	Day	\$ _____	X 10 =	\$ _____
3A-1	Weekly Rental (5-7 days), Regular (2 services per week)	Week	\$ _____	X 6 =	\$ _____

3A-2	Weekly Rental (5-7 days), Handicapped (2 services per week)	Week	\$ _____	X 6 =	\$ _____
4A-1	Weekly Rental (5-7 days), Regular (3 services per week)	Week	\$ _____	X 2 =	\$ _____
4A-2	Weekly Rental (5-7 days), Handicapped (3 services per week)	Week	\$ _____	X 2 =	\$ _____
5A-1	Monthly Rental (31 days), Regular (2 services per week)	Month	\$ _____	X 12 =	\$ _____
5A-2	Monthly Rental (31 days), Handicapped (2 services per week)	Month	\$ _____	X 12 =	\$ _____
6A-1	Monthly Rental (31 days), Regular (2 services per week), portable restroom unit with trailer	Month	\$ _____	X 10 =	\$ _____
6A-2	Monthly Rental (31 days), Regular (2 services per week), portable restroom trailer	Month	\$ _____	X 10 =	\$ _____
6A-3	Monthly Rental (31 days), Handicapped (2 services per week), portable restroom unit with trailer	Month	\$ _____	X 10 =	\$ _____

6A-4	Monthly Rental (31 days), Handicapped (2 services per week), portable restroom trailer	Month	\$ _____	X 10 =	\$ _____
7A-1	Monthly Rental (31 days), Regular (3 services per week)	Month	\$ _____	X 10 =	\$ _____
7A-2	Monthly Rental (31 days), Handicapped (3 services per week)	Month	\$ _____	X 10 =	\$ _____
8A-1	Yearly Rental (365 days), Regular (2 services per week)	Year	\$ _____	X 1 =	\$ _____
8A-2	Yearly Rental (365 days), Handicapped (2 services per week)	Year	\$ _____	X 1 =	\$ _____
9A-1	Yearly Rental (365 days), Regular (3 services per week)	Year	\$ _____	X 1 =	\$ _____
9A-2	Yearly Rental (365 days), Handicapped (3 services per week)	Year	\$ _____	X 1 =	\$ _____
10A	Service Calls (non-routine, i.e., upright tipped over unit)	Each	\$ _____	X 5 =	\$ _____
<b>GROUP A TOTAL:</b> <b>(Sum of Extended Prices from Items 1A-1 thru 10A)</b>					\$ _____

**GROUP B****SHORT TERM PORTABLE SANITATION RENTAL UNITS  
(SATURDAYS AND SUNDAYS)**

The following prices are for the rental of portable sanitation units for a short period of time. Primarily for Saturday morning rentals. Requests may be for units to be delivered and setup onsite by 7:00 A.M., with removal being late Saturday evening that same date (unless otherwise agreed to). The Unit Price shall include all fees to furnish, deliver, setup, maintain, service, and remove the portable sanitation units on an as-needed basis, to various County locations, in accordance with all applicable laws, regulations, and ordinances, including but not limited to the Florida Administrative Code 64E.

<b>Item</b>	<b>Description</b>	<b>U/M</b>	<b>Unit Price</b>	<b>Estimated Qty</b>	<b>Extended Price (Unit Price X Estimated Qty)</b>
1B-1	24 Hour Rental (Saturday), Regular	Day	\$ _____	X 10 =	\$ _____
1B-2	24 Hour Rental (Saturday), Handicapped	Day	\$ _____	X 10 =	\$ _____
2B-1	48 Hour Rental (Saturday/Sunday), Regular	Weekend	\$ _____	X 3 =	\$ _____
2B-2	48 Hour Rental (Saturday/Sunday), Handicapped	Weekend	\$ _____	X 3 =	\$ _____
3B-1	48 Hour Rental (Saturday/Sunday) with daily service, Regular	Weekend	\$ _____	X 5 =	\$ _____
3B-2	48 Hour Rental (Saturday/Sunday) with daily service, Handicapped	Weekend	\$ _____	X 5 =	\$ _____
4B	Service Calls (non- routine, i.e., upright tipped over unit)	Each	\$ _____	X 2 =	\$ _____
<b>GROUP B TOTAL:</b> <b>(Sum of Extended Prices from Items 1B-1 thru 4B)</b>					\$ _____

**GROUP C****SPECIAL EVENT SANITATION RENTAL UNITS**

The following prices are for the rental of portable sanitation units at special events, i.e., Carnivals, Easter Egg Hunts, Mardi Gras, or any activity that plans for a large group of people for short periods of time. The Unit Price shall include all fees to furnish, deliver, setup, maintain, service, and remove the portable restroom units on an as-needed basis, to various County locations, in accordance with all applicable laws, regulations, and ordinances, including but not limited to the Florida Administrative Code 64E.

<b>Item</b>	<b>Description</b>	<b>U/M</b>	<b>Unit Price</b>	<b>Estimated Qty</b>	<b>Extended Price (Unit Price X Estimated Qty)</b>
<b>RESTROOM RENTALS FROM 1 TO 19 UNITS</b>					
1C-1	Daily Rental (24 hours), Regular, Weekday (Monday thru Friday)	Day	\$ _____	X 5 =	\$ _____
1C-2	Daily Rental (24 hours), Handicapped, Weekday (Monday thru Friday)	Day	\$ _____	X 5 =	\$ _____
2C-1	Weekly Rental (5 days) with daily service, Regular, Weekday (Monday thru Friday)	Week	\$ _____	X 2 =	\$ _____
2C-2	Weekly Rental (5 days) with daily service, Handicapped, Weekday (Monday thru Friday)	Week	\$ _____	X 2 =	\$ _____
3C-1	Daily Rental (24 hours), Regular, Weekend (Saturday or Sunday)	Day	\$ _____	X 3 =	\$ _____
3C-2	Daily Rental (24 hours), Handicapped, Weekend (Saturday or Sunday)	Day	\$ _____	X 3 =	\$ _____
4C-1	Weekend Rental (48 hours), Regular, Weekend (Saturday and Sunday) with daily service	Weekend	\$ _____	X 3 =	\$ _____

4C-2	Weekend Rental (48 hours), Handicapped, Weekend (Saturday and Sunday) with daily service	Weekend	\$ _____	X 3 =	\$ _____
<b>RESTROOM RENTALS FROM 20 TO 39 UNITS (continued)</b>					
5C-1	Daily Rental (24 hours), Regular, Weekday (Monday thru Friday)	Day	\$ _____	X 2 =	\$ _____
5C-2	Daily Rental (24 hours), Handicapped, Weekday (Monday thru Friday)	Day	\$ _____	X 2 =	\$ _____
6C-1	Weekly Rental (5 days) with daily service, Regular, Weekday (Monday thru Friday)	Week	\$ _____	X 2 =	\$ _____
6C-2	Weekly Rental (5 days) with daily service, Handicapped, Weekday (Monday thru Friday)	Week	\$ _____	X 2 =	\$ _____
7C-1	Daily Rental (24 hours), Regular, Weekend (Saturday or Sunday)	Day	\$ _____	X 2 =	\$ _____
7C-2	Daily Rental (24 hours), Handicapped, Weekend (Saturday or Sunday)	Day	\$ _____	X 2 =	\$ _____
8C-1	Weekend Rental (48 hours), Regular, Weekend (Saturday and Sunday) with daily service	Weekend	\$ _____	X 2 =	\$ _____
8C-2	Weekend Rental (48 hours), Handicapped, Weekend (Saturday	Weekend	\$ _____	X 2 =	\$ _____

	and Sunday) with daily service				
<b>HANDWASHING FACILITIES (continued)</b>					
9C	Daily Rental (24 hours), Weekday (Monday thru Friday)	Day	\$ _____	X 2 =	\$ _____
10C	Weekly Rental (5 days) with daily service, Weekday (Monday thru Friday)	Week	\$ _____	X 2 =	\$ _____
11C	Daily Rental (24 hours), Weekend (Saturday or Sunday)	Day	\$ _____	X 2 =	\$ _____
12C	Weekend Rental (48 hours), Weekend (Saturday and Sunday) with daily service	Weekend	\$ _____	X 2 =	\$ _____
13C	Service Calls (non-routine, i.e., upright tipped over unit) for all of Group C	Each	\$ _____	X 2 =	\$ _____
<b>GROUP C TOTAL:</b> (Sum of Extended Prices from Items 1C-1 thru 13C)					\$ _____

**END OF ATTACHMENT F**