# Attachment B

# Price Proposal Form

Name of Proposing Organization:

|  |  |
| --- | --- |
| **TRAINING (Firm Fixed Cost As Described)** | **Firm Fixed Price** |
| **10 and 30 Hour Federal OHSA Training for Construction**  **Course develop**  **Per Attendee** | $  $ |
| **10 and 30 Hour Federal OHSA Training for General Industry**  **Course develop**  **Per Attendee** | $  $ |
| **CPR/First Aid**  **Course develop**  **Per Attendee** | $  $ |
| **Training on Federal and CAL OHSA Specific Topics\*:**  **Respiratory Protection**  **Course development**  **Per Attendee**  **Aerial Platforms**  **Course development**  **Per Attendee**  **Personal Protective Equipment**  **Course development**  **Per Attendee**  **Fall Protection**  **Course development**  **Per Attendee**  **Hazard Communication**  **Course development**  **Per Attendee**  Lock Out/Tag Out  **Course development**  **Per Attendee** | $  $  $  $  $  $  $  $  $  $  $  $ |

\*Provide pricing for each topic item.

|  |  |  |  |
| --- | --- | --- | --- |
| **ALL WORK EXCLUSIVE OF TRAINING** | | |  |
| Job Title/Classification | | Employee/Sub Contractor\*\* | Hourly Rate | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |
|  | |  | $     /hr. | | |

\*\*Provide both Job Title/Classification and indicate “Employee” or if using a sub contractor, indicate “subcontractor organization name.”

End of Attachment