

Request for Service Form - Labor Moving

Rocky Mountain Regional CASU (RMRC)
Box 25305, Bldg. 41, RM 137, Denver Federal Center
Denver, CO 80225
(303) 236-9828 FAX (303) 236-0016
or (303) 236-1942

RMRC Use Only
Task Order Number RMRC _____
Vendor Assigned to this task order _____
Proposal Number _____
RMRC Contact Person _____
RMRC Signature _____

Date of Request: _____

Requesting Agency:

Agency _____ RMRC MOU # DEN _____

Agency Physical Address _____

Customer Project Officer Name _____

Project Officer Signature _____ Date _____

Physical Address of Performance if other than the address shown above

Required Services:

Government client agency estimate of number of contractors required, identified by skill category:

of Trucks _____ Total # of Movers _____ (includes driver)

Estimated # of hours for job _____ (allow ½ hour for lunch)

Crew report time _____ Office hours _____ am to _____ pm

Period of Performance: start date _____ through _____

Overtime authorized Yes _____ No _____ Dollar Estimate for Overtime: _____

Safes to be moved: Yes ___ No ___ If Yes, Quantity _____ Approximate Weight Each _____

Describe work to be performed: On a separate page provide detailed description of the requirements of this Request for Service and the equipment required by the contractor.

