



LETTER OF INTENT (IBE FIRMS)

(Duplicate as needed for each IBE Contractor)

Contract Number: _____ **Name of Prime Contractor:** _____

Address: _____
Street City State Zip Code

Contact Person: _____ **Telephone** () _____ **Email:** _____

Project Name: _____

Sub-Contractor Name:	_____	Contact Person:	_____
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Subcontractor Start Date:	_____	IBE Type:	_____	Proposed Subcontract Percentage:	_____ %
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Address: _____
Street City State Zip Code

Telephone: () _____ **Fax:** () _____ **Email:** () _____

Description of Work to be performed by Subcontractor firm and/or materials to be supplied:

(Leave blank for Task Order Agreements)

The Prime Contractor and the Subcontractor listed above agree that they will enter into a contract for the above terms upon contract award to the Prime Contractor.

Prime Contractor:	
Tax ID#	_____
NAICS/ NIGP Code(s):	_____

IBE Subcontractor:	
Tax ID:	_____
NAICS/ NIGP Code(s):	_____

Legal Name of Firm

Signature

Print Name

Print Title

Phone Number

E-mail Address

Date

Legal Name of Firm

Signature

Print Name

Print Title

Phone Number

E-mail Address

Date