

RECEIPT CONFIRMATION

(This form must be completed by each member of the Proposer team and
returned to Rockland Green within 5 days of Proposer's receipt of this RFP)

PLEASE COMPLETE AND RETURN THIS CONFIRMATION FORM BY EMAIL WITHIN 5 WORKING DAYS OF RECEIVING THE RFP PACKAGE TO:

Dee Louis, Engineer II
Rockland County Solid Waste Management Authority d/b/a Rockland Green
Email: dlouis@rocklandgreen.com

Failure to return this form may result in no further communication or addenda regarding this RFP.

Contractor Name: Joe Lombardo Plumbing & Heating of Rockland Inc
Address: 321 Spook Rock Road Suite 109A
City: Suffern State New York Zip Code 10901
Contact Person: karen@josephlombardo.com
Phone Number: 845-357-6537 Ext. 2989 Fax: 845-357-8529
Email: karen@josephlombardo.com

I have received a copy of the above noted RFP.

☒ We will be submitting a Proposal for RFP 2021-13

☐ We will NOT be submitting a Proposal – (please indicate reason)

☒ We are evaluating the RFP and will make a decision after the Pre-Proposal Meeting

I authorize Rockland Green to send further correspondence that Rockland Green deems to be of an urgent nature by
the following methods:

Courier Collect: _____ Mail: _____
Email: karen@josephlombardo.com
Signature: _____
Title: _____