

**ATTACHMENT A**

***RFP RESPONSE COVER SHEET***

**COMMUNITY BEHAVIORAL HEALTH**

**Multi-Project/ Multi-Phased Renovations RFP**

CORPORATE NAME OF  
GENERAL CONTRACTOR ORGANIZATION \_\_\_\_\_

CORPORATE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAIN CONTACT PERSON \_\_\_\_\_

TITLE \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ FAX # \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF OFFICIAL AUTHORIZED  
TO BIND GENERAL CONTRACTOR TO  
A CONTRACT

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
TYPED NAME OF AUTHORIZED OFFICIAL IDENTIFIED ABOVE

DATE SUBMITTED \_\_\_\_\_