**Appendix C – COST PROPOSAL**

Cost proposal is to be submitted separate from Technical Proposal; paper and electronic.

**RFP Point of Contact**

|  |  |
| --- | --- |
| Vendor Name: |  |
| Vendor Address: |  |
| City, State, Zip Code: |  |
| Contact Person: |  |
| Phone Number: |  |
| Email Address: |  |

**Customer Service**

|  |  |
| --- | --- |
| Account Manager – Name: |  |
| Account Manager – Phone: |  |
| Account Manager – Email: |  |
| Back-Up – Name: |  |
| Back-Up – Phone: |  |
| Back-up – Email: |  |

**Training Location(s)**

|  |  |
| --- | --- |
| Location | Training Type |
|  |  |
|  |  |
|  |  |

**Bell 429 Training**

|  |  |  |  |
| --- | --- | --- | --- |
| Training Type | Days ARO | Hours | Price  (per attendee) |
| Initial Ground School |  |  |  |
| Initial Flight Training |  |  |  |
| * Flight Training Device (FTD) |  |  |  |
| Recurrent/Annual Ground School |  |  |  |
| Recurrent/Annual Flight Training |  |  |  |
| * Flight Training Device (FTD) |  |  |  |

* *All training shall be FAA approved.*
* *All training must be provided in the United States.*
* *All Flight training to be provided in the appropriate make and model aircraft provided by the vendor as part of the quoted bid.*
* *Upon successful completion of training, all students will receive a Flight Review and NVG sign off, if appropriate.*