

# HEPP - REQUEST FOR QUOTE (RFQ) FORM

Control/Tracking Number (MAX - 15 alphanumerical characters): \_\_\_\_\_

**CUSTOMER INFO:**

Requesting Customer/Activity Name: \_\_\_\_\_

Ordering DoDAAC: \_\_\_\_\_

POC Reviewing Quotes: \_\_\_\_\_

*Please Provide a Signed NDA for **each** POC with your request*

**ITEM INFO:**

Item Nomenclature:

HEPP Product Group:

Explanation of Intended Use:

Quantity: \_\_\_\_\_ Ea.

**DELIVERY INFO:**

Location:

Complete Delivery Address:

*For OCONUS Deliveries:*

Destination:

For Port: TAC and TCN Numbers must be provided

"Mark For" Address:

**TYPE OF FUNDING:**

MIPR:            Milstrip:            Direct Cite (Only DLA Distribution):

Special Instructions or Other Considerations:

Certify this request is true and accurate to the best of your knowledge: