## ATTACHMENT E MOVING SERVICES REQUEST ORDER

(To be completed by Authorized Purchaser)

Date: Contr	act Numbe	nber: MSRO			Number:		F	Requested Move Date:		
Contractor:			Author	Authorized Purchaser:			DAS Building: T IN			
Point of Contact:					Point of Contact:					
Phone:					Phone:					
Fax & Email:					Fax & Email:					
Move from Location:					Move to Location:					
□ Regular Rate (r □ Emergency Rat □ BOLI/Prevailing □ Storage	SPE busines:	ECIAL REQ	JIREMENTS    Moving Cartons   Miscellaneous Equipment / Supplies   Other							
PROJECT SUBMITTAL (To be completed by Contractor)										
Start Date:	Start Time:			End Date:			End Time:			
Move From Location: Comments (Attach Separate					Move To Location:					
·										
	Labor	1			Cartons	1		Miscellaneous		
Leadworker	Number	Hours	Cost	Size	Quantity	Cost	Specia	al Equipment / Suplies	Cost	
Labor I							1			
Labor II		1		1			1			
Driver w/ Truck							1			
		<u> </u>		Total Oz	ton Coot		Total	Miggellangeus Cast		
Total Labor Cost: Total Estimated Total Project Cost:					rton Cost: Total Miscellaneous Cost:					
Contractor's Sign	-						Da	ate:		

## **PROJECT AUTHORIZATION**

(To be completed by Authorized Purchaser upon acceptance of Project Submittal)

Authorized Purchaser's Signature:	Date:
Department of Justice's Signature:(Applicable ONLY if Authorized Purchaser is a State of Oregon Agency and cost exceed 137-045-0030 (1)(a))	Date: eds \$150,000 threshold, per OAF
Department of Adminstrative Services, Enterprice Asset Management's Signate (Applicable ONLY if Authorized Purchaser is a DAS-owned Building Tenant	
THIS PROJECT AUTHORIZATION IS SUBMITTED PURSUANT TO STATE C SOLICITATION #DASPS-2273-18 AND PRICE AGREEMENT PO-10700-0000 AGREEMENT TERMS AND CONDITIONS, INCLUDING THE MSRO AND PR & C'S), ARE HEREBY INCORPORATED BY REFERENCE AND APPLY TO T TAKE PRECEDENCE OVER ALL OTHER CONFLICTING T'S AND C'S, EXPE	0243. THE PRICE OJECT SUBMITTAL (T'S HIS PURCHASE AND RESS OR IMPLIED.
PROJECT CANCELLATION  (To be completed by Authorized Purchaser upon cancellation)	
In accordance with Section 2.2.10 of the above referenced Price Agreement, this Movin hereby cancelled.	g Service Request Order is
Reason for cancellation:	
Authorized Purchaser's Signature:	Date:
Contractor's Signature:	Date:

A copy of this completed and approved Moving Services Request Order must be submitted with all invoices for this project.