



COLORADO

Department of Public Health & Environment

REQUEST FOR APPLICATIONS COVER SHEET & SIGNATURE PAGE

Date: _____
Submit Applications RFA
Application Form

RFA Number: 48964768
CDPHE Contact: _____

[Click here to submit RFA
Application Form.](#)

RFA Submission Deadline: _____

Per the attached specifications, terms and conditions

**Unique Entity Identification
Number (UEI):** _____

Authorized Signature: _____

*Original signature (in ink or digital signature) acknowledges acceptance of all terms and
conditions of the solicitation.*

Typed/Printed Name: _____

Title: _____

Company Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone Number: _____

Fax Number: _____

Contact for Clarifications: _____

Title: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

IMPORTANT: The following information must be on the outside of the Application Packaging or referenced in the subject line if the application may be submitted electronically:

RFA _____

Applicants are urged to read the solicitation document thoroughly before submitting an application. **THIS PAGE MUST BE COMPLETED, SIGNED
(digitally or in ink) AND RETURNED WITH RESPONSE**

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