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| J:\Function\Branding\- New OMES logo\Horizontal\OMES-logo-horiz-RGB.jpg | Statement of Work |

The undersigned hereby certify to the parties’ agreement for the supplier named herein to perform the services outlined in the attached Statement of Work, in accordance with the terms of this contract.

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| **Project Scope Summary** (a general narrative of the needs and scope of the project): |
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| **General Requirements** (define the specific requirements to be met by this project) |
|       |
| **Deliverables** (define the products or work plan to be delivered): |
|  |
| **Schedule of Deliverables** (indicate sequence of deliverables): |
|  |
| **Timeline** (indicate anticipated completion timeline): |
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| **Costs** (define how costs are to be provided, i.e. “turnkey” and/or “hourly by skill set” and/or deliverables and/or milestones) |
|  |
| **The supplier’s response shall include:** |
| 1. A written narrative addressing their understanding and approach to address the Project Scope, Deliverables; Schedule; and Timeline.
2. The skill sets and hours required of each to complete project.
3. Resumes from associates to be assigned to this project.
4. Provide a detailed list of costs – costs may be either “total project turnkey” costs or hourly costs by skill set required as defined by the SOW.
 |
| **NOTE:** Upon satisfactory completion, the parties will execute an OMES Form 051 Certificate of Completion and Acceptance, in accordance with this contract. |
| This quotation remains valid for 120 days from the date signed by supplier named below. |
| This document must be completed and signed by all parties listed before any service can be performed. No additional terms or conditions will be added to this Statement of Work. The Statement of Work only details how the specific services required will be completed. |
| This SOW is hereby agreed to by:(List name and address of ordering agency) | This SOW is hereby agreed to by:(Supplier Name and Address) |
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|  |  |
| By: |  | By: |  |
|  | Authorized Signature |  | Authorized Signature |
|  |  |  |  |
| Name: |       | Name: |       |
|  | Type or Print |  | Type or Print |
| Date: |       | Date: |       |
|  |  |
| Purchase Order #: |       |  |
| Contact Person: |       | Phone #: |       |