**Instructions:** *Please complete this form in response to any Notice of Intent (NOI) to Waive Competitive Bidding that has been publicly posted on the State of Maine’s website before 5:00pm EST on the “Posting End Date” listed on the web table. Please submit the completed form as an attachment to* *NOI-Response@maine.gov**.*

|  |  |
| --- | --- |
| **In Response to NOI #:** |  |

|  |  |
| --- | --- |
| **Organization Name:** |  |
| **Name of Person Completing Form:** |  |
| **Title of Person Completing Form:** |  |
| **Telephone:** |  |
|  **E-Mail:**  |  |
| **Website:** |  |
| **Headquarters Address:** |  |
|  |
| **DUNS # (if known):** |  |

|  |
| --- |
| **Please provide a brief description of your organization’s qualifications and expertise related to the identified goods and/or services in the NOI.** |
|  |

|  |
| --- |
| **Using the format below, please provide examples that highlight your organization’s experience in providing the goods and/or services identified in the NOI.** |
| **Example One** |
| **Client Name:** |  |
| **Client Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Brief Description of Project** |
|  |

|  |
| --- |
| **Example Two** |
| **Client Name:** |  |
| **Client Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Brief Description of Project** |
|  |

|  |
| --- |
| **Example Three** |
| **Client Name:** |  |
| **Client Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Brief Description of Project** |
|  |