

<b>REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)</b>			THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE		PAGE OF PAGES 1   12
1. REQUEST NO. N00173-14-Q-0247	2. DATE ISSUED 7/10/14	3. REQUISITION/PURCHASE REQUEST NO. 71-3080-14	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1		RATING
5a. ISSUED BY Supply Officer (Code 3410) NRL Washington DC 20375-5329			6. DELIVER BY (Date) 4weeks ARO		
5b. FOR INFORMATION CALL (NO COLLECT CALLS)					
NAME Diltricia Montgomery		TELEPHONE NUMBER		7. DELIVERY	
		AREA CODE 202	NUMBER 767-0022	<input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
8. TO:			9. DESTINATION		
a. NAME ALL QUOTERS			a. NAME OF CONSIGNEE Naval Research Laboratory		
b. COMPANY			b. STREET ADDRESS 4555 Overlook Ave SW		
c. STREET ADDRESS			c. CITY Washington		
d. CITY		e. STATE	f. ZIP CODE	d. STATE DC	e. ZIP CODE 20375
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 7/17/14		IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.			

**11. SCHEDULE (Include applicable Federal, State and local taxes)**

ITEM NO. (a)	SUPPLIES/ SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
See attached continuation sheet					

12. DISCOUNT FOR PROMPT PAYMENT	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NUMBER	PERCENTAGE

NOTE: Additional provisions and representations  are  are not attached.

13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION
a. NAME OF QUOTER			16. SIGNER		
b. STREET ADDRESS					
c. COUNTY			a. NAME (Type or print)		b. TELEPHONE
d. CITY			f. ZIP CODE		AREA CODE
e. STATE			c. TITLE (Type or print)		NUMBER

CONTINUATION SHEET

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NAME OF OFFEROR CONTRACTOR

ALL QUOTERS

ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	<p>System requested:</p> <p>A) 5 Tesla, Room Temperature Bore, Cryogen Free Superconducting Magnet System with</p> <p>B) Power Supply</p> <p>C) Gifford-McMahon Coldhead</p> <p>D) Temperature Monitor</p> <p>E) Stand for positioning the magnet over the cryostat extension</p> <p>F) Automation software</p> <p>Items A-F should be provided as a fully integrated and tested system</p> <p>ITEM A:</p> <ul style="list-style-type: none"> <li>• Bore diameter &gt; 1.8 inches</li> <li>• Critical field &gt;= 5 Tesla</li> <li>• Central field homogeneity +/- 1.5% over a 10mm DSV</li> <li>• Quench protection required</li> <li>• Cryostat should be operated with bore in vertical or horizontal orientation</li> <li>• Pressure relief valve protection required</li> <li>• High current leads</li> <li>• Magnet's vacuum enclosure height &lt; 6"</li> <li>• Magnet's vacuum enclosure outer diameter &lt; 8"</li> <li>• Fully integrated and tested with system</li> </ul> <p>ITEM B:</p> <p>PROGRAMMABLE REVERSING BIPOLAR SUPERCONDUCTING MAGNET POWER SUPPLY:</p> <p>Superconducting Magnet BiPolar Reversing Power System,</p> <p>-60 amp magnet power supply and programmer</p> <ul style="list-style-type: none"> <li>• 60 Amps maximum current output</li> <li>• 5 volts maximum output voltage load</li> <li>• Ramp function programmable</li> <li>• Menu driven format</li> <li>• Internal energy absorber and quench protection</li> <li>• IEEE-488 and RS232 computer interfaces</li> <li>• Fully integrated and tested with system</li> </ul>	1	ea		

CONTINUATION SHEET

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NAME OF OFFEROR CONTRACTOR

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ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p>ITEM C:                      TWO STAGE SUMITOMO GM (Gifford-McMahon)                      COLDHEAD cooling power 1.5W @4.2K</p> <ul style="list-style-type: none"> <li>• Sumitomo Water cooled compressor</li> <li>• 20 meter interconnecting hoses</li> <li>• 6 meter CH power cable and 3 meter input power cable</li> <li>• Cooling power: 1.5 watt at 4.2 K, (50/60Hz) 35/45 watts at 50K</li> </ul> <p>ITEM D:                      MODEL 14 TEMPERATURE MONITOR:</p> <ul style="list-style-type: none"> <li>• Four multipurpose input channels</li> <li>• Supports: Diode, Platinum, RTD's , and all cryogenic resistor temperature sensors</li> <li>• LED display</li> <li>• Remote interfaces include Ethernet, RS-232</li> <li>• Fully integrated and tested system</li> </ul> <p>ITEM E:                      FLOOR STAND:</p> <ul style="list-style-type: none"> <li>• RTB MAGNET with GM COLDHEAD will be mounted on a fixed floor stand that allows placing the magnet over the cryostat extension without direct mechanical contact to the cryostat or cryostat support (i.e. optical table)</li> </ul> <p>ITEM F:                      • Windows based automated software should be provided with a panel display and control</p> <p>Brand name or Equal</p> <p>If available please include a published price list or a cost breakdown and return the RFQ package to the following fax number (202) 767-6678.</p> <p>Any questions concerning this Request for Quotation (RFQ) must be emailed to SolQnA@nrl.navy.mil at least five (5) days before the closing date shown in block 10 on page 1 of the RFQ.</p>				