

FILLABLE BID DOCUMENT

PROJECT DESCRIPTION:

RMF NO.: 4040.4013

REPLACE ELEVATOR IN FOUR (4) VENTILATION BUILDINGS

BID NUMBER: BID-24-001

(Name of Individual, Firm or Corporation)

ACKNOWLEDGEMENT OF ADDENDA

Acknowledgement shall be made of receipt of any and all addenda pertaining to the above designated project which are issued by the District prior to the bid opening date shown herein. Failure to include this acknowledgement in the bidding may result in the rejection of your bid.

By signing this bid, the Bidder acknowledges receipt of the following addenda to the bid and/or plans for the above designated project which were issued under cover letter(s) of the date(s) shown hereon:

1.	Cover Letter of		
		(Date)	
2.	Cover Letter of		
		(Date)	
3.	Cover Letter of		
		(Date)	

WORK REFERENCES

The Bidder shall list at least three (3) similar projects performed in the past five (5) years. Each listed project shall include the name, address, contact person(s) and the telephone number of the Owner and Owner's representative for whom the work was performed, the description and value of the portion of the project with work of a similar nature. Each listed project shall also include the project location, completion date and the names of the Bidder's project manager and superintendent(s). If for any of the listed projects, the Bidder's participation was that of a subcontractor, the value of the subcontracted work performed by the Bidder shall be included. In such cases, the Owner of the project is the General Contractor.

Project Name:						
Date of Project:	Project Value:					
Contact Person:	Telephone Number:					
Description of Work Performed:						
Project Name:						
Date of Project:	Project Value:					
Contact Person:	Telephone Number:					
Description of Work Performed:						
Project Name:						
Date of Project:	Project Value:					
Contact Person:	Telephone Number:					
Description of Work Performed:						

NON-COLLUSION AFFIDAVIT

THIS FORM must be completed, signed, notarized and returned with Bid; and failure to do so, may result in the rejection of your Bid. A separate form must be submitted by each principal of a joint venture Bid.

- 1. In preparing and submitting this Bid, I, the firm, corporation or officers, agents or employees thereof did not, either directly or indirectly, enter into any combination or arrangement with any person, firm or corporation or enter into any agreement, participate in any collusion, or otherwise take any action in the restraint of free, competitive bidding in violation of the Sherman Act (15 U.S.C. Section 1) or Article 1.1 or Chapter 12 of Title 18.2 (Virginia Governmental Frauds Act), Sections 59.1-9,1 through 59.1-9.17 or Sections 59.1-68.6 through 59.1-68.8 of the Code of Virginia.
- 2. I, the firm, corporation or officers, agents or employees thereof have neither directly nor indirectly entered into any combination or arrangement with any person, firm or corporation or entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free competitive bidding in connection with this Contract, the effect of which is to prevent competition or increase the cost of construction of this Contract.

During the preceding 12 months, I (we) have been a member of the following Highway Contractor's Associations, as defined in Section 33.1-336 of the Code of Virginia (1970). (If none, so state).

Name		Location	of Principal Office
3. The undersigned is duly authoriz submitted on behalf of the Bidder for this P.		ake the foregoing statem	ents to be filed with Bids
Signed at	_, this	day of	, 20
Name of Organization			
Ву:	/G' 1		
	(Signature and	Title)	
State of To-wit:			
County (city) of			
I,, a Notary F	Public in and for the Sta	te and County (City) afore	esaid, hereby certify
that this day personall above statements and that such statements a		and made oath that he is d	uly authorized to make the
Subscribed and sworn to before me this	day of	, 20	
Notary Public My commission expires			

BID SHEET Unit Price Total Price **Item Description** QTY Unit 1. REPLACE ELEVATOR IN FOUR (4) VENTILATION BUILDINGS: 1 LS 2. CONCRETE REPAIR, (Elevator Landing Sills and top of Ships Ladder): 60 SF TOTAL BID By: (Please Print or Type) Signature: Title: Company: Address: City/State Zip Code

Date:

Phone No.: