

(NEW BID FORM)
SECTION III
BIDDER'S PROPOSAL FORM

Having carefully examined the Specifications, the undersigned bidder declares that the only person or parties interested in this Bid as Principals are those named herein; that this Bid is made without collusion with any other person, firm or corporation; that the Bidder has carefully examined, and this Bid is made in accordance therewith, locations, conditions and classes of materials of the proposed work; and agrees that the Bidder will provide all the necessary machinery, labor, tools, and apparatus and will do all the work and furnish all the materials called for in the Contract and Specifications in the manner prescribed therein. COB reserves the right to accept or reject, in part or in whole, any proposals submitted and to waive any technicalities for the best interest of COB. Bidder agrees to perform all of the work listed in the proposal and as described in the specifications and shown on the plans, for the following prices:

Tree Trimming Services:

1. **Bid Price per hour** (to include a bucket truck, chipper, chip dump bed, related tools and personnel)

\$ _____

Bid Price Written in Words

2. **Overtime Price per hour** (to include bucket truck, chipper, dump bed, related tools and personnel)

\$ _____

Bid Price Written in Words

List any additional charges:

The above prices shall include all labor, materials, overhead, profit, insurance, etc. to cover the finished work of the kinds called for.

The Bidder agrees that this bid shall be good and may not be withdrawn for a period of 90 calendar days after the scheduled closing time for receiving bids.

By: _____	_____
	Business Name
_____ Printed Name	_____ Address
_____ Telephone	_____ City, State, Zip
_____ Fax	_____ Email Address

Receipt is hereby acknowledged of the following addenda to the Contract Documents:

Addendum No. 1 dated _____	Received _____
Addendum No. 2 dated _____	Received _____
Addendum No. 3 dated _____	Received _____

By: _____	_____
	Business Name
_____ Printed Name	_____ Address
_____ Telephone	_____ City, State, Zip
_____ Fax	_____ Email Address