

Concow Resilience Project: Unit 8A Vegetation Treatment
Attachment A.1: Contractor Information

Proposal Due Date: Wednesday, October 1st

Company Name: _____

Company Address: _____

Phone: _____ Email: _____

Federal ID: _____ Years in Business: _____

References: Provide 3 references (at least one must be from a USFS-lands project), with contact names and phone numbers for each reference.

1. Contact Name: _____ Phone: _____

Business Name / Client: _____

2. Contact Name: _____ Phone: _____

Business Name / Client: _____

3. Contact Name: _____ Phone: _____

Business Name / Client: _____

Bid validity: Specify the length of time this bid is valid for (minimum of 30 days) _____

Bid Information

Bidder agrees to accept as full payment the following total base bid price:

_____ dollars

(in words)

(in numerals)

In the event of a discrepancy, the amount in words shall prevail.

The bidder hereby acknowledges that the total base bid price is based solely on the bidder's own estimate of costs and includes all applicable taxes, overheads, and profit.

Contractor Signature: _____