

**BID FORM RFQ
25T-CN-346**

- 1) The undersigned, Legal Name of Bidder:

(Company Name)_____on

this date:_____, having familiarized (himself/herself) (themselves) with the local conditions affecting the cost of work, and with the Specifications, including the Request for Quote (RFQ), this Bid Form, the Form of Contract, the General Conditions, the Scope of the Services, Specifications and Standards, Alaska Native/ American Indian Preference Requirement, Tribally Designated Wages, all addenda, as prepared by CIHA, and on file in the office of CIHA, hereby proposes to furnish all labor, equipment and services required to provide Garage services:

For Quote

In order to uniformly evaluate prices submitted and determine the lowest bidder, CIHA will calculate quotes as follows:

DOOR SIZE	R-12	R-16
16X8	\$	\$
16X7	\$	\$
10X7	\$	\$
9X8	\$	\$
9X7	\$	\$
8X8	\$	\$
8X7	\$	\$

DOOR OPENERS	7' height doors	8' height doors
Belt Drive	\$	\$
Chain Drive	\$	\$
LiftMaster model 98022		\$
LiftMaster model 8155		\$

Haul away fee for old door \$

ATTACHMENT C

However, actual payment will be based on work ordered and satisfactorily completed. CIHA will not be held to minimums.

- 2) In submitting this bid, it is understood that the right is reserved by CIHA to reject any and all bids at its sole discretion, and for its convenience or benefit. The bidder agrees to execute and deliver to CIHA a contract, in the prescribed form, and furnish the required payment within ten (10) days after the date CIHA mails or otherwise delivers to bidder CIHA's written acceptance of this bid as the successful bid.
- 3) I/We have submitted with this bid the following items:
 - a) Representations & Certifications of Offerors, form HUD 5369-A (Attachment A)
 - b) Lobbying Certification (Attachment B)
 - c) Bid Form (Attachment C)
 - d) Tribally Designated Wages (Attachment D)
- 4) I/We further understand the penalty for making false statements in offers is prescribed by federal law at 18 U.S.C. §1001.

NAME OF BIDDER

OFFICIAL ADDRESS

BY:

Address

Title

City/State/ZIP

Signature

Phone Number

E-mail address