



## Lincolnshire-Riverwoods Fire Protection District

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115 Schelter Rd., Lincolnshire, IL 60069 Phone: 847-634-2512 Fax: 847-634-2572 [www.LRFPD.org](http://www.LRFPD.org)

### BID FORM

#### LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT STATION 52 ROOF REPLACEMENT

##### **A. ACKNOWLEDGMENT**

By its signature below, the Bidder acknowledges it has received a complete set of specifications and understands that meaning of their content and shall willingly comply with the guidelines set forth in these documents. The Bid Documents are composed of the following documents, which the Bidder acknowledges it has received in full:

- Letter to Bidder
- Advertisement for Bid
- Terms and Conditions for all Bids
- Contract Requirements
- Project Specifications
- Bid Form/proposal
- Addendum
- Contractor's Certification of Eligibility
- Affidavit of Experience

If any of the above documents have been omitted, please contact the LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT immediately to receive replacements for the missing documents.

##### **B. PROPOSAL**

The undersigned has carefully examined the Terms and Conditions and all Bids, the Contract Requirements, Insurance Requirements, Project Specifications, and Bid Form and proposed to provide various types of equipment, supplies or materials in accordance with this bid and all attachments and exhibits for the following lump sum:

\$ \_\_\_\_\_

**C. ADDENDUM**

Each Bidder for this project shall be responsible for acknowledging all addenda that are issued by the Lincolnshire-Riverwoods Fire Protection District during the bidding period. In the appropriate place, please sign for each addendum received:

ADDENDUM NO. 1

Signature	Date
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ADDENDUM NO. 2

Signature	Date
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ADDENDUM NO. 3

Signature	Date
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ADDENDUM NO. 4

Signature	Date
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ADDENDUM NO. 5

Signature	Date
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**D. AFFIDAVIT OF EXPERIENCE** (This Affidavit must be executed)

STATE OF \_\_\_\_\_)

SS: \_\_\_\_\_

COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being duly sworn, says that he/she is

\_\_\_\_\_ of \_\_\_\_\_  
(Sole Owner, Member of Firm, Corporate Official) (Individual, Firm, Corporate Name)

Product Name

Contact

Phone #

Completion Date


\_\_\_\_\_  
(Signature)

**E. CERTIFICATIONS AND SIGNATURE**

The undersigned has checked the plan(s), specifications and the above figures and understands that they shall be responsible for any errors or omissions based upon these specifications and submitted on the Bid Offer Form.

It is understood and agreed that the LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT reserves the right to accept or reject any or all bids and to waive any formality in any bid received.

The undersigned further declares that this bid is made without any connection with any person making another bid for the same contract, that the bid is in all respects fair and without collusion or fraud, that no member of the LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT Board of Trustees or other officer of the LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT, or any person in employ of the LINCOLNSHIRE-RIVERWOODS FIRE PROTECTION DISTRICT is directly or indirectly interested in this bid, or in an portion of the profits thereof.

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Name of Person or Entity Submitting This Bid

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Street Address

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City

State

ZIP

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Telephone Number

Fax Number

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Email Address

Bid form is not valid unless properly signed:

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Signature

Date

