

**COUNTY OF ROCKLAND
FACILITIES MANAGEMENT**

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BLDG. A., 2nd FLOOR, 50 SANATORIUM RD, POMONA, NY 10970
PHONE: 845-364-2958 / FAX: 845-364-3810

CAPITAL PROJECT NUMBER: 2110

BID NUMBER: RFB-RC-2022-2110-001

PROJECT: BUILDING F INTERIOR AND EXTERIOR RENOVATIONS AND IMPROVEMENTS, BATHROOM RENO.

BID PROPOSAL FORM – PLUMBING

TO THE COUNTY OF ROCKLAND

The Bidder hereby offers and agrees to furnish the material or service in compliance with all terms, the scope of work, conditions, specifications and amendments in the Invitation to Bid and Bidding Documents.

The Bidder hereby acknowledges that they have received a copy of the County's Equal Employment Opportunity Policy and that their rights and responsibilities concerning it were explained in the County's EEO Policy. A copy of the County's EEO policy is available at: www.rocklandgov.com/files/3615/6924/6652/execorder_2019-02_letterhead.pdf

Under penalty of perjury, the Bidder hereby states that all information it provided is true, accurate and complete and that the undersigned has the authority on behalf of the bidder to submit this Bid, which if accepted by the County, will result in a binding contract with the Bidder.

The undersigned acknowledges that the Bidder has examined the Bidding Documents and has become thoroughly familiar with the Project and the required Work, and that the Bidder possesses all requisite qualifications and licenses, therefore; and will provide all materials, labor, supervision, transportation, and equipment necessary or required, for the completion of the Work detailed in the Contract Documents, entitled:

CAPITAL PROJECT NO. 2110

PROJECT: BUILDING F INTERIOR AND EXTERIOR RENOVATIONS AND IMPROVEMENTS, BATHROOM RENO.

The Bidder acknowledges receipt of all Addenda as of the Bid submission date (the last number of which is _____.)

We submit the following bid: \$ _____

BID WRITTEN OUT

Date _____

Company Name

CORPORATE SEAL

Address

City State Zip

Federal Identification Number: _____ Phone: _____ Fax: _____

E-Mail Address

Signature of Person Authorized to Sign

Title

Printed Name

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID