SECTION 00 4000 PROPOSAL FORM

PROJECT	Edenville Dam Restoration Project-Phase V Bid Package 2 - Painting
OWNER	Four Lakes Task Force Gladwin and Midland County Delegated Authority for the Four Lakes Special Assessment District 233 E. Larkin Midland, MI 48640
ENGINEERS:	GEI Consultants of Michigan, Inc. 230 N. Washington Square Suite 201 Lansing, MI 48933
	Spicer Group 230 S. Washington Avenue Saginaw, MI 48607
CONSTRUCTION MANAGER	Spence Brothers 203 Washington Avenue Suite 360 Saginaw, MI 48607 Phone: (989) 752-0400 Contact: Ryan Corby ryancorby@spencebrothers.com
BID PROPOSAL	Prior to May 08, 2024, at 2:00pm (local time)
PROPOSAL SUBMITTED BY: _	
	(Contractor)
The Undersigned has visited the s	site and familiarized themselves with the local condition

The Undersigned has visited the site and familiarized themselves with the local conditions affecting the cost of the work and the Contract Documents, including plans, the Architect's drawings, and Project Manual, the Construction Manager's Project Manual, and all the labor, materials, tools, expendable equipment and transportation services, etc., necessary to perform and complete in a workmanlike manner all work required under the Bid Category(s) quoted below for the aforementioned project, all in strict accordance with the Contract Documents, as prepared by the Architect and Construction Manager.

Four Lakes Task Force Edenville Dam Restoration-Phase V

Contractor's Name
Bids on Proposal Forms identical to the forms included in the bidding documents shall be filled in completely, including any applicable alternate prices and unit prices. Bid amounts must be in words as well as figures. Proposals that are not filled in completely may be rejected.
Proposals may be rejected which do not include a bid amount, PLM bond costs, bid bond, noted addenda (if any), noted alternate (if any), percentages for changes in the work, or a signed proposal form.
Proposal MUST include the following attachments: Iran Economic Sanctions Act Affidavit Bid Bond Sample Insurance Certificate
Proposals that contain qualifications and/or modifications to the base proposal may be rejected.
Signatures must be in long hand and executed by the principal duly authorized to make contracts. The bidder's legal name must be fully stated.
If a contractor elects to bid more than one bid category, then a separate proposal form must be submitted for each bid category.
Bid Category No.:
Bid Category Name:
Base Bid for the Lump Sum of(\$)
Add for the Cost of Performance and Payment Bonds(\$)

ALTERNATES		
Alternate No. 1: The Owner may choose to put a cont place for this project (OCIP). This program would provexcess liability coverage for your onsite activities. You other contractually required insurance coverages includiability coverage for your offsite activities. Please incl for this OCIP coverage with your bid	vide general liability and would need to supply all ding general and excess	
Alternate No. 1, Base Bid for the Lump Sum of	Deduct (\$)
Thermate 1 to. 1, Base Bid for the Earlip Sain of		
Cost of Performance and Payment Bonds	Deduct (\$)
	ges in the work, involving addit e to be performed by the sub- ving percentages to be added to	ions to the ontractors the cost to
CHANGES IN THE WORK: For authorized change work, the Undersigned agrees to perform, or to caus such authorized work at net cost to him plus the follow the Owner, which percentages shall include the contra	ges in the work, involving addit be to be performed by the sub- ving percentages to be added to actor's cost for on-site supervis	ions to the ontractors the cost to
CHANGES IN THE WORK: For authorized change work, the Undersigned agrees to perform, or to caus such authorized work at net cost to him plus the follow the Owner, which percentages shall include the controverhead and profit. Fee for work performed by your own forces: (15% maximum for additions)	ges in the work, involving additue to be performed by the subciving percentages to be added to actor's cost for on-site supervis Additions	ions to the ontractors the cost to
CHANGES IN THE WORK: For authorized change work, the Undersigned agrees to perform, or to caus such authorized work at net cost to him plus the follow the Owner, which percentages shall include the controverhead and profit. Fee for work performed by your own forces: (15% maximum for additions) Fee for work performed by subcontractors:	ges in the work, involving additude to be performed by the subcoving percentages to be added to actor's cost for on-site supervisity Additions	ions to the ontractors the cost to
CHANGES IN THE WORK: For authorized change work, the Undersigned agrees to perform, or to caus such authorized work at net cost to him plus the follow the Owner, which percentages shall include the controverhead and profit. Fee for work performed by your own forces: (15% maximum for additions)	ges in the work, involving additue to be performed by the subciving percentages to be added to actor's cost for on-site supervis Additions	ions to the ontractors the cost to

before the milestone dates as stipulated in the Milestone Schedule in the Project Manual.

TAXES:

All subcontractors and suppliers will be required to pay sales and use tax on any items purchased for this project and shall be included in the above bid(s).

Contractors Name:			
ADDENDA			
period, the bidder shall fi	ll in their numbers and	Documents have been received lates. This acknowledges that work involved in this proposal.	the Bidder has
		Dated	
CLARIFICATION MEM	МО		
during the bid period, the	bidder shall fill in their n	the Bidding Documents have umbers and dates. This acknow ect on the work involved in thi	wledges that the
		Dated	
		Dated	
ACCEPTANCE OF PRO	OPOSAL:		
		Work, covered by this proposa (60) days after the scheduled of	
VOLUNTARY ALTERN	NATE		
Bid Category	Written D	escription of Voluntary Alter	rnate
For the amount of:	Add/Deduct		Dollars
		ADD/DEDUCT\$	

VOLUNTARY ALTERNATE

Bid Category	Written Description of Voluntary Alternate		ate
For the amount of:	Add/Deduct		Dollars
		ADD/DEDUCT\$	

STATE ZIP CODE BY TITLE (Signature) (Printed Name) DATE TELEPHONE ()	Contractors Name	
() Partnership having the following partner(s): () Corporation incorporated under the state laws of This proposal is submitted in the name of and notice of acceptance should be mailed or deliver to: FIRM NAME ADDRESS	· ·	has the legal status checked below:
Corporation incorporated under the state laws of		ner(s):
to: FIRM NAME		
ADDRESS CITY		d notice of acceptance should be mailed or delivered
STATE ZIP CODE BY TITLE (Signature) (Printed Name) DATE TELEPHONE ()	FIRM NAME	
BY	ADDRESS	CITY
(Signature) (Printed Name) DATE TELEPHONE _()	STATE	ZIP CODE
	BY	TITLE
DATE TELEPHONE ()	(Signature)	
	(Printed Name)	
$\mathbf{F}\mathbf{A}\mathbf{Y}$ ()	DATE	TELEPHONE ()
raa <u>(</u>)		FAX ()
IN PRESENCE OF:	IN PRESENCE OF:	E-MAIL
		TITLE

If a corporation, affix Corporate Seal.

Submit two (2) additional copies along with this original form and retain one copy for your file.

END OF PROPOSAL FORM