

SEALED BID

Project: **Travelers' Rest State Park Chip Seal
and Re-stripe**

MT FWP Number: **7196144**

Name of Contractor: _____

Address: _____

Dept. of Labor & Industry Cert. of Reg.#. _____

Acknowledges Addendum No.: _____

Kevin Harrington, Project Manager
Montana Fish, Wildlife and Parks
Design and Construction
1522 Ninth Avenue
P.O. Box 200701
Helena, Montana 59620-0701

PROPOSAL

Travelers' Rest State Park Chip Seal & Re-Stripe FWP #7196144

Montana Fish, Wildlife and Parks

Design and Construction

PO Box 200701

Helena, Montana 59620-0701

1522 9th Ave.

Helena, MT 59601

The undersigned, having familiarized himself with the conditions of the work and the contract documents as prepared by **Kevin Harrington, Project Manager** agrees to furnish all labor, materials, equipment, and services necessary to complete all general construction work, as bid herein, for a project entitled **Travelers Rest State Park Chip Seal & Re-Stripe** in accordance with the Contract Documents including all Addenda. The bidder agrees to perform all the work described below at the price shown as follows:

Reminder To Contractors: All Unit Prices must be filled in on the Bid Form for a valid bid (18-2-303 MCA).

Base Bid:

| Item # | Description | Estimated Quantity | Unit Measure | Unit Price | Amount |
|------------------------|--|--------------------|--------------|------------|--------|
| 1. | Mobilization | 1 | LS | | |
| 2. | 3/8" Chip Seal Coat | 8605 | SY | | |
| 3. | 4" White Waterbourne Parking Lines | 1356 | LF | | |
| 4. | ADA Parking Symbols and Adjacent Stall Hatch | 5 | EA | | |
| 5. | Cross Walk Re-stripe | 6 | EA | | |
| Total: \$ _____ | | | | | |

BASE BID: _____

_____ AND _____ /100 DOLLARS (\$ _____).

Contractor Name: _____

And certifies that he is a duly and regularly licensed contractor registered with the Montana Department of Labor and Industry:

FIRM NAME: _____

TELEPHONE #: _____ FAX#: _____

BY: _____

REGISTRATION # : _____

BUSINESS ADDRESS: _____

E-MAIL ADDRESS: _____

This bidder acknowledges receipt of the following addenda:

ADDENDUM NO. _____ DATED

ADDENDUM NO. _____ DATED

Contractor Name: _____