

BID FORM

Shenandoah County Animal Shelter building addition 2014-04

Bid for all work: \$ _____

Contractor: _____ Phone: _____

Address: _____

Name of agency(s) and contact persons) with whom you have your Worker's Compensation and General Liability Insurance Policies:

Name, address and phone numbers of three references for whom you have performed work during the past two years.

1. _____

2. _____

3. _____

Signature of Bidder: _____

Printed Name of Bidder: _____

Date Bid submitted: _____

Comments: _____