# **INFORMAL REQUEST FOR BID (RFB) FORM**

# **RFB DUE DATE: [Insert Date]**

# **RFB CUTOFF TIME: \_\_\_\_\_\_\_\_\_\_\_\_local time**

***[Insert Time XX:00 AM/PM]***

# **SUBMITTED BY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Company Name** – Hereinafter referred to as the “Bidder”

**BID CHECKLIST:**

HAVE YOU INCLUDED THE REQUIRED FORMS (If applicable)?

THE FOLLOWING FORM IS REQUIRED IF BID IS IN EXCESS OF $50,000:

**ATTACHMENT A:** RESPONSIBLE CONTRACTOR VERIFICATION AND

CERTIFICATION OF COMPLIANCE \_\_\_Yes \_\_\_No \_\_\_NA

 PREFERENCE, CERTIFIED TARGETED GROUP (TG) OR

ECONOMICALLY DISADVANTAGE (ED) PRIME CONTRACT BIDDER \_\_\_Yes \_\_\_No

 *(Provide a copy of your firm’s letter indicating certification, if applicable.)*

CERTIFIED, VETERAN-OWNED PREFERENCE FORM \_\_\_Yes \_\_\_No

*(Provide a copy of signed form and support documentation if applicable)*

### BID FOR CONTRACT WORK

We, the undersigned, being familiar with the local conditions affecting the cost of the Work and with the Contract Documents, including the Advertisement for Bids, Bid Form, Special Conditions, Drawings, Specifications and Addenda. All Addenda shall become part of this bid and the Contract. As acknowledgement of this requirement, we acknowledge the receipt of **Addenda Numbers** **\_\_\_\_\_\_\_\_\_**. In accordance with the provisions thereof, we hereby propose to furnish all labor, materials, equipment and services necessary for the following Project:

**Project Name:**

#  **[Insert Project Name]**

#  **[Insert Building Name, if applicable]**

#  **[Insert Name of College/University]**

 **[Insert Campus Name, if applicable]**

#  **[Insert City, Minnesota]**

**TIME OF COMPLETION:** The undersigned Bidder hereby affirms and states that, if awarded the Contract for said Project, Work will commence within 10 (ten) consecutive calendar days after the written Notice to Proceed and the entire Contract will be Substantially Complete by \_\_\_\_\_\_\_\_\_\_\_\_ *[Insert either a specific date or a specific number of calendar days after the date of the written Notice to Proceed.]*as a condition of the Contract. We understand further, that the Contractor shall be assessed liquidated damages (if applicable) for each consecutive calendar day any Project Work component remains incomplete after the required date(s) of completion. Contract processing delays by the Bidder shall not extend the Time of Completion.

**A. BASE BID**

## OUR TOTAL BASE BID FOR THE WORK OF THIS PROJECT IS:

## \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOLLARS ($\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 (Amount in words)

**B. DEDUCT ALTERNATES**

ALTERNATE NO. 1: [**Insert Title of Alternate]**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOLLARS ($\_\_\_\_\_\_\_\_\_\_\_\_\_)

 (Amount in words)

ALTERNATE NO. 2: [**Insert Title of Alternate]**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOLLARS ($\_\_\_\_\_\_\_\_\_\_\_\_\_)

 (Amount in words)

*[OPTIONAL ON PER PROJECT BASIS. DELETE IF NOT USED.]*

**C**. **ALLOWANCES:** An allowance for **[insert a short description of the allowance]**in the amount of**[insert the dollar amount of the allowance $xxxx.00]**shall be included in your base bid.

*[OPTIONAL ON PER PROJECT BASIS. DELETE IF NOT USED.]*

**D. UNIT PRICES:** The Owner may direct Modifications affecting the quantity of certain items. The Unit Prices for such Modifications shall include all materials, labor, equipment, insurance, taxes, transportation, overhead and profit to cover the finished Work as described, and shall apply to both additions and deductions in quantities, except that if deductions are made after materials are fabricated and/or delivered, the price deductions shall be adjusted accordingly. The Owner reserves the right to reject any Unit Price which it considers unreasonable. The Bidder shall complete this section of the Bid Form as follows:

*[Example: The following is an example only of one possible type of Unit Price. See Instructions for additional information.]*

1. **New granular fill, replacement & compaction: $\_\_\_\_\_\_\_\_\_\_ per cubic yard as measured in place after compaction.**

**E. REJECTION OF BIDS/ BID WITHDRAWAL**: In submitting this bid it is understood that the Owner reserves the right to reject any and all bids. It is agreed that this bid cannot be withdrawn until after **thirty (30)** *[edit number of days if funding is going to be delayed]* calendar days have passed from the date of the bid opening, if the Owner has not yet acted thereon.

**2. SUBMITTALS AND ATTACHMENTS REQUIREMENTS:**

 **(1) RESPONSIBLE CONTRACTOR:** See Section 00 45 13, **Attachment A**: Responsible Contractor Verification and Certification of Compliance. The Prime Contractor Bidder must submit **Attachment A** with their response to this solicitation.

This attachment is only required for bids submitted in excess of **$50,000.00.** *[Delete if not required.]*

**(2) PREFERENCE - TARGETED GROUP (T.G.) AND/OR ECONOMICALLY DISADVANTAGED (E.D.) SUBCONTRACTOR REQUIREMENTS:** See Section 00 45 39: The bidder shall check the appropriate box and return this form with your bid. If you are claiming preference, also submit a copy of your letter of certification from the Office of Equity in Procurement.

 **(3) PREFERENCE - VETERAN-OWNED/SERVICE DISABLED VETERAN-OWNED CONTRACTOR REQUIREMENTS:** See Section 00 45 45. The bidder shall check the appropriate box and return this form with your bid.

Eligible veteran-owned small businesses must be **currently** certified by the U.S. Department of Veterans Affairs prior to the solicitation opening date and time to receive the preference. Information regarding certification by the United States Department of Veterans Affairs may be found at <https://www.va.gov/osdbu/> .

**BID CERTIFICATION**

 **COMPANY NAME**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Insert Company Name)

**STATE OF INCORPORATION:** For corporations, please list the state of incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAMES OF PARTNERS:** For partnerships, please list the full names of the partners:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Print or Type) (Print or Type)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company’s Official Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Company’s Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company’s E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_