

PROPOSAL PRICING AND RATES FORM

PROPOSAL DUE DATE: 3:00PM, CST, December 13, 2021

SUBMITTED BY: _____
Company Name – Hereinafter referred to as the “Bidder”

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, General Conditions of the Contract for Construction as amended therein, Special Conditions, Drawings, Specifications and Addenda Numbers _____, on file in the Office of:

James Splett, Building Maintenance Supervisor
1324 Harmon Place
Minneapolis, Minnesota 55403

and in accordance with the provisions thereof, hereby propose to furnish all labor, materials, equipment and services necessary for the following Project:

Vertical Transportation Maintenance Agreement
Minneapolis Community and Technical College
1501 Hennepin Avenue
Minneapolis, Minnesota 55403

(1) BASE BID – ANNUAL TOTAL FOR ALL ELEVATORS

YEAR ONE (1/1/2022-12/31/2022):

_____ DOLLARS (\$ _____)
(Amount in Words)

YEAR TWO (1/1/2023-12/31/2023):

_____ DOLLARS (\$ _____)
(Amount in Words)

YEAR THREE (1/1/2024-12/31/2024):

_____ DOLLARS (\$ _____)
(Amount in Words)

(2) The Bidder shall complete this section of the Bid Form as follows: Provide Hourly Rates for additional services not included in the Contractor's maintenance agreement:

YEAR ONE (1/1/2022-12/31/2022):

Billing Rates	Mechanic	Helper	Crew
Straight Time	\$ _____	\$ _____	\$ _____
Overtime	\$ _____	\$ _____	\$ _____
Overtime Premium (Double Time)	\$ _____	\$ _____	\$ _____

YEAR TWO (1/1/2023-12/31/2023):

Billing Rates	Mechanic	Helper	Crew
Straight Time	\$ _____	\$ _____	\$ _____
Overtime	\$ _____	\$ _____	\$ _____
Overtime Premium (Double Time)	\$ _____	\$ _____	\$ _____

YEAR THREE (1/1/2024-12/31/2024):

Billing Rates	Mechanic	Helper	Crew
Straight Time	\$ _____	\$ _____	\$ _____
Overtime	\$ _____	\$ _____	\$ _____
Overtime Premium (Double Time)	\$ _____	\$ _____	\$ _____

(3) COMPANY NAME:

(Insert Company Name)

By: _____
(Print or Type)

By: _____
(Print or Type)

Signature: _____

Signature: _____

Title: _____

Title: _____

Date: _____

Date: _____

Company's Official Address:

Company's Telephone Number: _____

Company's E-mail Address: _____

END OF SECTION