# BID FORM

**PROJECT NAME AND LOCATION:**

**Roof Replacement** **Contract Number: AW2602831**
**Salish Place**

## BID FORM

The undersigned, Legal Name of Bidder: _____

on this date: _____, 2026, having familiarized him/herself with the contract documents, site conditions, and has field verified all measurements contained in the project manual as prepared by the Owner, hereby proposes to furnish labor, materials and necessary equipment – all including, but not limited to, demolition, disposal, new installation and the required applicable taxes and fees to complete the work for the following bid amounts:

**BASE BID** _____ (**$**_____)
(Including sales tax indicated in Instructions to Bidders)

**UNIT PRICES See Specification Section 01100, 1.5 – Unit Prices**

**Unit Price No. 1** _____ ($_____)
Sheathing Replacement (Including materials/supplies sales tax indicated in Instructions to Bidders)

**ADDENDA** _____
Acknowledge receipt of any addenda by inserting the number(s) above

In submitting this bid, it is understood that the right is reserved by the Owner to reject any and all bids. The undersigned hereby agrees that this proposal shall be a valid and firm offer for a period of Sixty (60) calendar days from the date of Bid Opening.

Bidder agrees that Work will be substantially complete and ready for final payment in accordance with the Contract Documents on or before the date, within the number of calendar days indicated.

The undersigned Bidder hereby certifies that, within the three-year period immediately preceding the bid solicitation date for this Project, the bidder is not a "willful" violator, as defined in RCW 49.48.082, of any provision of chapters 49.46, 49.48, or 49.52 RCW, as determined by a final and binding citation and notice of assessment issued by the Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

_____ _____
Signature of Bidder Print Your Name

Submitted on _____ day of _____ 2026

_____ _____
City State

# BIDDER INFORMATION

**BIDDER INFORMATION**

Name of Bidder (Company): _____

Address: _____

Contact Name: _____

Phone Number: _____ Email Address: _____

Business Type: General Contractor ☐ Other ☐ (Please specify): _____

Bidder is a(n): ☐ Individual ☐ Partnership ☐ Joint Venture ☐ Incorporated in the state of _____

List business names & associated UBI # used by Bidder during the past 5 years if different than above:

_____

Bidder has been in business continuously from: _____
*Month, Year*

Business License #: _____ Federal ID #: _____

Current UBI #: _____ Dept. of L&I Worker's Comp. Acct. #: _____

Bidder has experience in work "Similar in Scope and Complexity" comparable to that required for this Project:

As a prime contractor for _____ years. As a subcontractor for _____ years.

| OWNER(S) OF COMPANY (List **all** owners): | OWNER'S SOCIAL SECURITY NUMBER (**only** required **if** sole proprietorship): |
|---|---|
| | |
| | |
| | |

No. of regular full-time employees other than owner(s): _____

Indicate clearly the kind of work your company will actually perform in this project:

_____

Approximate % of work your company will actually perform: _____

List the supervisory personnel to be employed by the Bidder and available for, and intended to, work on this project:

| Name | Title | How Long With Bidder |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

# BIDDER INFORMATION

## SUBCONTRACTORS

Do you intend to use Subcontractor(s) in this project? No ☐ Yes ☐ (If yes, you must show the name of the subcontractors. Attach additional pages as necessary.)

| Subcontractors Name | Subcontractor's UBI# | Phone Number | Trade | Years in Business |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

## BIDDER'S EXPERIENCE

Projects successfully supervised and completed by your company for work of similar scope and value as specified in bid documents in the last 5 years. Attach additional pages as necessary.

| Name of Project | Completion Date | Duration (Months) | Nature of Work | Amount of Contract |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

| Owner's Name (of project listed above) | Project Address | Contact Person | Phone Number |
|---|---|---|---|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

Has Bidder ever been found guilty of violating any State or Federal employment laws? ☐ No ☐ Yes
If yes, give details & attach additional pages as necessary:

Has Bidder ever filed for protection under any provision of the federal bankruptcy laws or state insolvency laws?
☐ No ☐ Yes If yes, give details & attach additional pages as necessary:

# BIDDER INFORMATION

Has any lien, claim and/or adverse legal action related to construction been rendered against Bidder in the past five years? (i.e., open claims, lawsuits, warrants, judgements including but not limited to those that would show on the L&I website) ☐ No ☐ Yes If yes, give details & attach additional pages as necessary:

Has Bidder or any of its employees filed any claims with Washington State Worker's Compensation or other insurance company for accidents resulting in fatal injury or dismemberment in the past 5 years? ☐ No ☐ Yes
If yes, please state:

| Date | Type of Injury | Agency Receiving Claim |
|---|---|---|
| | | |
| | | |

Bidders current Experience Modification Rate (EMR): _____

***(If Bidder is self-insured, attach proof of EMR stated, showing complete worksheet calculations)***

The bidder hereby certifies that the information contained in this Bidder's Information is accurate, complete and current.

BY: _____ NAME: _____
(signature) (print)

TITLE: _____ DATE: _____