

Quick Start EV Training Center – Pooler, GA

PROPOSAL FORM



1. Please indicate the bid package(s) for which you are interested in qualifying:

2. Company Name:

3. Base Bid Costs

A. Base Bid Cost: \$_____

4. Bidder acknowledges receipt of the Addenda checked on the list below and confirms that the information within these addenda has been incorporated into the bid amount. *Please note that there may be more boxes than actual addenda. Do not check boxes that do not apply.*

- Addendum 1
- Addendum 2
- Addendum 3
- Addendum 4

5. Bid Alternates

- Alternate #1: Additional Parking

ADD \$_____

- Alternate #2: Revised Landscape Plan

ADD \$_____

- Alternate #3: Added Bollard Lights

ADD \$_____

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- Alternate #4: Added Dining Patio

ADD \$ _____

- Alternate #5: Epoxy in lieu of Polished Concrete in High-Bay

ADD / DEDUCT \$ _____

- Alternate #6: Additional Interior Windows

ADD / DEDUCT \$ _____

- Alternate #7: Quartz Countertops in lieu of Solid Surface

ADD / DEDUCT \$ _____

- Alternate #8: Training Room C & Storage 1013 Build Out

ADD / DEDUCT \$ _____

6. Allowances & Unit Prices for Site Package Proposal:

Item	Description	Unit Price	Quantity	Total
A	Unsatisfactory soil Excavation and off-site disposal & Replacement with satisfactory soil material from off-site.		2,000 cy	
B	Mass Rock Removal & Replacement with satisfactory soil material		1,000 cy	
C	Trench Rock Removal & Replacement with satisfactory soil material from off-site		10 cy	
D	Rippable Rock Removal & Replacement with satisfactory soil material from off-site		10 cy	
E	Caisson Rock Removal & Replacement with satisfactory soil material from off-site		10 cy	

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7. Signatures:

Authorized Signature

Title

Print Name

Date

8. Main Office Locations & Company Contacts, please complete the table below.

Company Name	
Mailing Address	
Office Phone Number	
Project Contact	
Email Address	
Cell Phone Number	

9. Please list 3 similar projects that your company has completed in the last 5 years.

Project #1	
Name of Project	
Description of Work Performed	
Owner Name Owner Phone Number Owner Email	
Architect Name Architect Phone Number Architect Email	
GC or CM Name GC or CM Phone Number GC or CM Email	
Final Contract Dollar Value	
Date Complete	

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Project #2	
Name of Project	
Description of Work Performed	
Owner Name Owner Phone Number Owner Email	
Architect Name Architect Phone Number Architect Email	
GC or CM Name GC or CM Phone Number GC or CM Email	
Final Contract Dollar Value	
Date Complete	

Project #3	
Name of Project	
Description of Work Performed	
Owner Name Owner Phone Number Owner Email	
Architect Name Architect Phone Number Architect Email	
GC or CM Name GC or CM Phone Number GC or CM Email	
Final Contract Dollar Value	
Date Complete	

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10. Please list your safety EMR for the past 5 years.

Present Rate	
Last Rate	
Year Before Rate	
Year Before Rate	
Year Before Rate	

11. Has your company filed any claims against a CM at Risk or General Contractor in the past five (5) years, whether resolved or still pending resolution?

Yes No

If yes, state the project name(s), year(s), and reason why:
