



**CITY OF EAST PROVIDENCE
SENIOR CENTER WINDOW REPLACEMENT
BID FORM
REQUEST FOR PROPOSALS
RFP EP22/23-16
BID OPENING TUESDAY MAY 30 2023 AT 11:00AM**

The undersigned bidder, being familiar with local conditions affecting the cost of the work, hereby proposes to provide all necessary labor, materials, equipment and incidental items necessary to do all the work called for in the Specifications and in accordance with the Contract Documents.

A mandatory pre-bid meeting will be held on **Thursday May 11, 2023 at 10:00AM** at the Senior Center located at **610 Waterman Ave, East Providence RI 02914**.

The undersigned further understands that the lump sum bid include all work including labor materials and equipment necessary to construct the project in accordance with the plans, details and specifications. This is a prevailing wage project using the federal wage General Decision Number: RI20230001 02/03/2023.

All prices must be written in words and figures. In case of discrepancy, the amount shown in words will govern.

At the time of the opening of bids, the bidder shall have inspected the sites of the work to familiarize themselves with the conditions relating to the work under the contract.

Bidder hereby agrees to begin work within ten (10) days after the date of the NOTICE TO PROCEED, unless otherwise specified or permitted by the CITY. **All work shall be warranted for one year.**

5 % Bid Bond will be required for this project. Payment requests shall be submitted on original AIA forms.

The undersigned bidder further agrees to pay the premiums for the Surety Bond (Performance, Labor and Materials Payment Bonds) for which said premiums are to be included in the Bid Price.

The City reserves the right to waive any informality in order to reject any or all bids if deemed to be in the best interest of the City.

TOTAL LUMP SUM:

COST: _____ **\$** _____
(Written in words) (Written in figures)

BIDDING FIRM: _____

NUMBER & STREET: _____

CITY/STATE/ZIP: _____

SIGNATURE: _____ **DATE:** _____

PRINT NAME: _____ **TITLE:** _____

PHONE NO: (____) _____ FAX NO: (____) _____