

**SECTION II
PROPOSAL
BID NUMBER 230802**

To: Public Utility District No. 1 of Clallam County
Post Office Box 1000
Carlsborg, WA 98324

The undersigned (hereinafter called the "Contractor") hereby proposes to perform the work requested by the Public Utility District No. 1 of Clallam County (hereinafter called the "District"), as detailed in the Notice and Instruction To Bidders, Specifications, and elsewhere in this contract, upon the terms and conditions herein stated:

1. The undersigned has examined said Section I - Notice and Instruction to Bidders and Section III - Specifications. In accordance with the terms and provisions of the foregoing, the following prices are tendered as an offer to perform the work required. The distribution wood pole inspection, treatment, and reporting shall be as follows:

Item "A":
Good Pole - Inspected, Treated, Reported. UNIT PRICE: \$ _____

Item "B":
Reject Pole - Inspected, Treated, Reported and Recommended UNIT PRICE: \$ _____

Item "C":
Reject Pole – Inspected, photographed and Reported: UNIT PRICE: \$ _____

Item "D":
Reported Only. UNIT PRICE: \$ _____

Item "E":
Fumigate Only. UNIT PRICE: \$ _____

Item "F":
For Transmission Poles in Categories A, B, or C the Contractor shall add the following: UNIT PRICE: \$ _____

Item "G":
Install Plant Unit Numbers. UNIT PRICE: \$ _____

Item "H":
Install Guy Guards UNIT PRICE: \$ _____

Item "I":
Report GPS Latitude and Longitude of each pole locations UNIT PRICE: \$ _____

Tax Rate: 8.6% (Forks city limits and unincorporated areas of Clallam County)
8.8% City of Port Angeles

NOTE: This project has a not-to-exceed estimated amount of \$141,250.00 (not including WSST).

Supplemental Bidder Responsibility Criteria included Yes _____ No _____

- 1.) A Resume of "Treating Foreman" listing the name of the service that provided the wood pole inspector training and the date the training was completed.
- 2.) The "Treating Foreman" resume must show a minimum of 2 years of experience in supervising a test and treat crew and list with contact information the last 5 test and treat projects.
- 3.) The resume must also include either copies of current certifications in first aid, CPR, PPE, and safety training and/or list each training with the name of the service that provided the training and the dates completed.

Starting Date: Commence upon issuance of the Notice-to-Proceed or as soon thereafter as weather permits

Completion Date: On or before November 2, 2023

Any alterations or exceptions to the Contract Documents:

2. The Contractor acknowledges having made a careful examination of the project plans and specifications, and is informed as to the nature of the proposed project; the transportation facilities; the kind of equipment, tools, and other facilities required before and during the completion of the project; and with the labor conditions which would affect work on the project.
3. The Contractor warrants possession of adequate financial resources for the performance of the work covered by this proposal and that the firm will provide necessary tools, materials, and equipment; and a qualified treating foreman, superintendent, and other employees.
4. The Contractor is a pre-qualified electrical contractor in accordance with Chapter 54.04 RCW.
5. Have you had any fatal accidents on any project during the past three years?

Yes: _____ No: _____
(Please provide a brief description below)

6. Contractor Information:

State of Washington Contractor's License Number:	
Expiration Date:	
State of Washington UBI Number (Unified Business Identifier):	
Federal Employer Identification Number:	
Contractor's Business Entity Type:	

7. Contractor's Safety. The Contractor's Safety Contact Person is listed below, along with that person's telephone number(s). The Contractor shall notify the District in the event that the Safety Contact Person changes. The Contractor shall be familiar with the District's safety plan, attached as **Exhibit "E."**

Name	Telephone Number

8. Subcontractors. Any and all subcontractors to be employed on the project are listed below. The Contractor understands that any subcontractor not listed in this proposal will be denied access to the project unless such change or substitution has been approved in advance by the District with an executed Change Order.

Name	Address	Type of Work

9. Attached hereto is a Certified Check, Cashier's Check, or Bid Bond in the amount of

_____ Dollars (\$ _____)
drawn in favor of Public Utility District No. 1 of Clallam County, this amount being not less than five percent (5%) of the total bid.

Bidder: _____

(Signature)

(Typed)

(Title)

(Date)

Mailing Address:	_____ _____ _____
Street Address:	_____ _____ _____
Telephone Number:	_____
FAX Number:	_____
E-mail Address:	_____