

MAINE MEDICAL CENTER

PROPOSAL FORM FOR GENERAL CONTRACTOR
(Revised January 12, 2001)

BIDDER: _____

TO: MAINE MEDICAL CENTER
22 BRAMHALL STREET
PORTLAND, MAINE 04102

A. Having carefully examined the Form of Contract, General Conditions, and the Plans and Specifications prepared by **Harriman** for the construction of **MMC HVAC Lab Renovations** as well as the premises and conditions affecting the work, we the undersigned propose to furnish all labor, equipment and materials necessary for, and reasonably incidental to the construction and completion of this project for the tax exempt sum of:

Base Bid: \$ _____

B. Plus those costs (if any) associated with the labor, equipment, material, testing and certification necessary for, and reasonable incidental to the Telecommunication, Data, Nurse Call and Cabling addressed in Spec Section 16600, for the tax exempt sum of:

Telecomm/Data Bid: \$ _____

C. Alternate No. 1: \$ _____
Alternate No. 2: \$ _____
Total Bid: \$ _____

D. This proposal includes the following addenda to the Plans and Specifications:

Addendum # _____, Dated _____
Addendum # _____, Dated _____
Addendum # _____, Dated _____

E. Subcontractors for the proposed contract are as follows:

<u>TRADE</u>	<u>NAME OF SUBCONTRACTOR</u>
1. Millwork	_____
2. Electrical	_____
3. Painting	_____
4. Flooring	_____
5. HVAC	_____
6. Plumbing	_____
7. Drywall	_____
8. Doors, Frames and Hardware	_____
9. Acoustical Ceilings	_____

10. Sprinkler (Design/

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- 11. Build) _____
Telecommunication _____
Cable Installer _____

- F. The undersigned agrees, if this proposal is accepted, to sign a contract and deliver it, along with the bonds and affidavits of all insurance specified, within twelve (12) calendar days after the date of notification of such acceptance, except if the 12th day falls on a holiday, a Saturday or Sunday, then the conditions will be fulfilled if the required documents are received before 12 o'clock noon on the day following the holiday, or the Monday following the Saturday or Sunday.
- G. The undersigned agrees, if awarded the Contract, to complete the work within _____ calendar days.
- H. This proposal includes the full cost of all bonds, insurance and permits required for the completion of this work.

Signed _____

By (Name & Title) _____

Address _____

Telephone and Fax Numbers _____

Note: If Bidder is a corporation, write State of incorporation, and if a partnership, give full name of all partners.

END OF PROPOSAL FORM