PART 5 - BIDDER'S CHECKLIST

The following checklist is for the Bidder's assistance only. It is not inclusive and **is not a part of the bid documents**; therefore, this checklist should not be included with the Proposal Form when submitting a bid proposal.

5.01 **PROPOSAL FORM**: (only one original proposal form to be submitted) (also see 3.01 and 600.42 of Manual)

Base Bid

( ) Write in the amount of the base bid in words and numbers. The written word shall govern.

Alternates

( ) Write in each alternates amount in words and numbers. The written word shall govern.

Addenda

( ) Acknowledge the receipt of each addendum by writing in the number of the addendum and the date received.

Acceptance

( ) Proposal is signed by authorized person

( ) Name of Business - complete spelling of bidder's name and address - exact as recorded at the Secretary of State [http://www.sos.state.ms.us/busserv/corp/soskb/csearch.asp] which should be the same as you applied for at the Mississippi State Board of Contractors [http://www.msboc.us/Search2.CFM] (see 2.07, 3.01, 5.01, proposal form)

( ) Legal address of the business listed above (at SOS and Contractor's Board)

( ) Correct Certificate of Responsibility Number(s) as it appears in the current Mississippi State Board of Contractors Roster

Certificate of Responsibility Number(s) on envelope (see below for on proposal form)

( ) Base Bid is under $50,000 and no number is required

( ) Base Bid is under $50,000 and the statement "bid does not exceed $50,000" is on the outside of the sealed envelope

( ) Base Bid is over $50,000 and number is required

( ) Joint Venture and *joint venture* number is required

OR ( ) Joint Venture participants' numbers are required

5.02 **BID SECURITY:**

( ) Included Bid Bond

OR ( ) Included Certified Check

5.03 **POWER OF ATTORNEY:**

( ) Included Power of Attorney

5.04 **NON-RESIDENT BIDDER:**

( ) Attached a Copy of Non-Resident Bidder's Preference Law

OR ( ) Attached a Statement

5.05 **SUB-CONTRACTORS NAME** **Refer to 1.04 for responsiveness**

( ) List your Mechanical and Electrical Contractors regardless of cost

* List name even for under $50,000
* Fire Protection Sprinkler Contractors do not have to be listed
* If there is a separate HVAC/Plumbing Contractor, so notate as mentioned herein
* If Mechanical, Plumbing, and/or Electrical Contractor is performed by the General, be sure the General has a COR for said discipline and list General's name on the line and COR number mentioned herein

OR * If there is no Mechanical, Plumbing, and/or Electrical Contractor, so notate "none" on the line

5.06 **SUB-CONTRACTORS' COR NUMBER** **Refer to 1.04 for responsiveness**

( )* List Certificate of Responsibility Number for over $50,000.00 (also allowed, but not required, for under $50,000)

* If under $50,000 – so notate on the COR line "under $50,000" (or can still show COR#)

OR * If there is no Mechanical, Plumbing, and/or Electrical in Divisions 15 or 16, so notate "none" on the name line and the COR# line as mentioned herein

***** END OF SECTION *****

Division 0

PROPOSAL FORM
SECTION 00300

To: Bureau of Building, Grounds and Real Property Management
501 North West Street, Suite 1401B [Woolfolk Building]
Jackson, Mississippi 39201

Re: Project # _____
Project Title _____
Location _____

I propose to complete all work in accordance with the Project Manual and Drawings within _____ consecutive calendar days for the sum of: (Professional must specify number of days)

BASE BID: (Write in the amount of the base bid in words and numbers. The written word shall govern.)

_____ Dollars ($_____)

ALTERNATES: (Write in the amount of all of the alternates in words and numbers. The written word shall govern.)

Alternate #1 ( ) Adds ( ) Deducts

_____

Dollars ($_____)
Description _____

_____

Alternate #2 ( ) Adds ( ) Deducts

_____

Dollars ($_____)
Description _____

_____

Alternate #3 ( ) Adds ( ) Deducts

_____

Dollars ($_____)
Description _____

_____

Alternate #4 ( ) Adds ( ) Deducts

_____

Dollars ($_____)
Description _____

_____

Alternate #5 ( ) Adds ( ) Deducts

_____

Dollars ($_____)
Description _____

_____

ADDENDA ACKNOWLEDGMENT: (date below can be the date Addendum was issued OR the date Addendum was received by Bidder)

No. 1 Date _____ (#1 included in Bid Documents) No. _____ Date _____

No. _____ Date _____ No. _____ Date _____

↑Complete all lines including #1↑

ACCEPTANCE:

I certify that I am authorized to enter into a binding contract, if this Proposal is accepted.

Signature _____ Date _____
Name and Title _____
Name of Business _____

Complete spelling of bidder's name and address - exact as recorded at the Secretary of State [http://www.sos.state.ms.us/busserv/corp/soskb/csearch.asp] which should be the same as you applied for at the Mississippi State Board of Contractors [http://www.msboc.us/Search2.CFM] (see 2.07, 3.01, 5.01)

Address _____
City/State/Zip Code _____
Phone _____ Fax _____ Email _____

- Certificate of Responsibility Numbers(s):

_____ _____

_____ _____

- Attach copy of Non-Resident Bidder's Preference Law (5.04 of Bidder's Checklist)

- **Mechanical / Electrical Contractors:**

Divisions 15 & 16 of the Specifications of the BoB Standard Form Of Agreement Between The Owner And The Contractor

List the Mechanical / Plumbing / and/or Electrical Contractors in accordance with 5.05 and 5.06 of the Bidder's Checklist.

Mechanical Contractor: _____ Certificate of Responsibility No. _____
Plumbing Contractor: _____ Certificate of Responsibility No. _____
Electrical Contractor: _____ _____ Certificate of Responsibility No. _____

Complete all lines in some manner per 5.05 even for under $50,000 ↑ **Complete all lines in some manner per 5.06 ↑**

- Mississippi Department of Agriculture & Commerce
  Bureau of Plant Industry
  Landscape License Number _____ MS Code 69-19-1 – 69-19-15

↑Complete for prime landscaping projects