



Bidder shall provide proof of Workers' Compensation and Liability Insurance in the amounts as outlined below, prior to commencement of any work:

Yes \_\_\_\_\_ No \_\_\_\_\_

**Bodily Injury Liability:**

each person \$ 500,000

each accident \$1,000,000

**Property Damage Liability:**

each person \$ 500,000

each accident \$1,000,000

The signer of this Proposal as Bidder declares that he has carefully examined this advertisement and specifications herein contained and he proposes and agrees that if this Proposal is accepted he shall contract with the City of Wadsworth, Ohio, to furnish and deliver the material bid in accordance with the advertisement and specifications as therein set forth.

Each bid must contain the full name of every person or company interested in the same and be accompanied by a Bond or Certified Check in the sum of One Thousand Dollars (\$1000.00), as a guarantee that if the bid is accepted, a contract will be entered into and its performance effected. Should any bid be rejected, such Bond or Check will be returned to the bidder and should any bid be accepted, such Bond or Check will be returned to the bidder upon proper execution of the Contract.

The City reserves the right to reject any or all bids and to waive any informalities or irregularities in the bids received and to award to the lowest and/or best bidder.

John C. Easton, Director of Public Service

Signature of Bidder \_\_\_\_\_

By \_\_\_\_\_  
Printed Name Title

Business Name \_\_\_\_\_

Business Address of Bidder \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2011

NOTE: This proposal sheet must be signed by the Bidder. IF FIRM OR CORPORATION, NAME FOLLOWED BY THE NAME OF THE PERSON AUTHORIZED TO SIGN SAID BID, STATING HIS TITLE OR POSITION WITH THE FIRM OR CORPORATION: IF PARTNERSHIP, SIGN PARTNERSHIP NAME BY ONE OF THE PARTNERS.

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail \_\_\_\_\_