

Town of Bolton Department of Public Works

12 Forbush Mill Road – Bolton, MA 01740

Phone - (978) 779-6402 Fax – (978) 779-0301

dpw@townofbolton.com

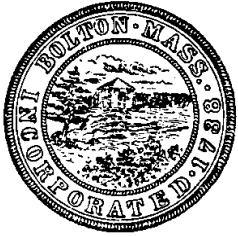
NOTICE TO BID

The Town of Bolton will accept bids for **approximately 500 tons** bituminous concrete at the plant in accordance with Massachusetts Department of Public Works standard specifications of Highway and Bridge 1988. This bid shall remain in effect from date of award through June 30, 2017.

Bid packets and specifications can be picked up at the Town of Bolton Department of Public Works – 12 Forbush Mill Road – Bolton – Monday through Thursday 8:00AM to 3:00PM beginning on June 21, 2016. Bids will be public opened and read at 11:00AM on July 12, 2016. Specifications are also available via email by contacting dpw@townofbolton.com.

All bids shall be clearly marked “BITUMINOUS CONCRETE – AT PLANT”

The awarding authority is the Town of Bolton Board of Selectmen / Town Administrator. The Town of Bolton reserves the right to waive any informality in, and reject any or all bids, or accept all or any part thereof, and to make awards in matters deemed in the best interest of the Town.



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BITUMINOUS CONCRETE – AT PLANT

FY17 BID SHEET

COMPANY NAME: _____

Bituminous Concrete -

\$_____ per ton at plant

Signature of Authorized Agent

Date

Printed Name & Title



TOWN OF BOLTON

MASSACHUSETTS

Town Hall, 663 Main Street, Bolton, MA 01740

Phone 978-779-2297 Fax 508-779-5461

REQUIRED CERTIFICATIONS

CERTIFICATION OF GOOD FAITH Pursuant to section 10 of chapter 30B of the general laws, (and the Town's policy for all contract pursuant to MGTL c. 30.39M or c. 149.44a-H) the following certificate must be completed and attached to the bid or proposal:

The undersigned certifies under the penalties of perjury that this bid or proposal has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club or other organization, entity, or group of individuals.

BY: _____ SIGNATURE: _____
(COMPANY NAME)

TITLE: _____ DATE: _____

CERTIFICATION THAT STATE TAXES ARE FILED AND PAID Pursuant to section forty-nine A of Chapter sixty-two C of the General Laws, the following certification must be completed and attached to the bid or proposal:

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required by law. My social security number (voluntary) or Federal Identification number is: _____.

BY: _____ SIGNATURE: _____
(COMPANY NAME)

TITLE: _____ DATE: _____

Approval of a contract or other contract or other agreement will not be granted unless this certification clause is signed by the applicant(s). Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filings or tax payment obligations. Providers who fail to correct non-filing or delinquency will not have a contract or other agreement issued, renewed or extended.

CERTIFICATE OF NON-CONFLICT OF INTEREST

The undersigned certifies under penalties of perjury that no official or employee of the governmental body for which the attached solicitation is proposed is pecuniarily interested in this proposal or bid or in the contract which it offers to execute or in expected profits to arise therefrom; and further that no official or employee of said governmental body will receive an commission, discount, bonus, gift, contribution, or received from or share in the profits of any person making or performing such contract. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity or group of individuals.

BY: _____ SIGNATURE: _____
(COMPANY NAME)

TITLE: _____ DATE: _____

NON COLLUSION STATEMENT

The undersigned certifies under penalties of perjury that this id in all respects is bonafide, fair and made without collusion or fraud with any other person. As used in this paragraph, the word "PERSON" shall mean any natural person, joint venture, partnership, corporation or other business or legal entity.

BY: _____ SIGNATURE: _____
(COMPANY NAME)

TITLE: _____ DATE: _____

WAGE RATE CERTIFICATION

This is to certify that the company will pay the prevailing wage rates as determined by the Massachusetts Department of Labor and Industries required by M.G.L. Chapter 149 Section 26 and 27D.

BY: _____ SIGNATURE: _____
(COMPANY NAME)

TITLE: _____ DATE: _____



TOWN OF BOLTON

MASSACHUSETTS

Town Hall, 663 Main Street, Bolton, MA 01740

Phone 978-779-2297 Fax 978-779-5461

COMPANY INFORMATION

Company Name: _____

Company Address: _____

City / State / Zip: _____

Office Phone: _____

Contact Name: _____

Contact Phone: _____

Email: _____

Emergency Contact Number (if available): _____