

BID FORM

Land Clearing
Whitmore, Oahu, Hawaii
IFB-24-200-202

Procurement Officer
Agribusiness Development Corporation
235 South Beretania St., Ste 205
Honolulu, Hawaii 96813

Dear Sir:

The undersigned has carefully read and understands the terms and conditions specified in the Bid Form and Special Provisions attached hereto, and in the AG-008 General Conditions, by reference made a part hereof and available upon request; and hereby submits the following offer to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this offer, 1) Is declaring his/her offer is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) he/she is certifying that the prices submitted were independently arrived at without collusion.

The undersigned represents: **(Check \checkmark one only)**

- A **Hawaii business** incorporated or organized under the laws of the State of Hawaii;
OR
 A **Compliant Non-Hawaii business** not incorporated or organized under the laws of the State of Hawaii, but registered at the State of Hawaii Department of Commerce and Consumer Affairs Business Registration Division to do business in the State of Hawaii.

State of incorporation: _____

Offeror is.

- Sole Proprietor Partnership Corporation Joint Venture
 Other _____

Federal Tax I.D. No.: _____

Hawaii General Excise Tax License I.D. No. _____

Payment address (if other than street address below): _____

City, State, Zip Code: _____

Business address (street address): _____

City, State, Zip Code: _____

A Insurance Coverage:	<u>Carrier</u>	<u>Policy No.</u>	<u>Agent</u>
Commercial General Liability	_____	_____	_____
Automobile Liability	_____	_____	_____
Workers' Compensation	_____	_____	_____
Temporary Disability	_____	_____	_____
Prepaid Health Care	_____	_____	_____
Unemployment Insurance State of Hawaii I.D. No	_____		

Respectfully submitted:

Date: _____

(x) _____
 Authorized (Original) Signature

Telephone No : _____

 Name and Title (Please Type or Print)

Fax No.: _____

E-mail Address: _____

* _____
Exact Legal Name of Company (Offeror)

*If Offeror is a "dba" or a "division" of a corporation, furnish the exact legal name of the corporation under which the award will be executed.

(End of page)

BASE BID
Land Clearing and Fire Mitigation, Oahu

	Quantity	Unit	Description	Unit Price	Total
1.	1	LS	Land Clearing of 52 acres, including solid waste removal, in-place, complete. Unit cost shall be all-inclusive of labor, taxes, and any other incidental cost.		
2.	1	LS	Hauling and disposal of green waste from 52 acres (if applicable)		
3.	1	LS	Land Clearing of 13 acres, in-place, complete. Unit cost shall be all-inclusive of labor, taxes, and any other incidental cost.		
4.	1	LS	Land Clearing of 1.5 acres, including solid waste removal, in-place, complete. Unit cost shall be all-inclusive of labor, taxes, and any other incidental cost.		
5.	1	LS	Removal and disposal of one abandoned vehicle.		
6.	1	LS	Land Clearing of 0.3 acres, in-place, complete. Unit cost shall be all-inclusive of labor, taxes, and any other incidental cost.		
7.	1	EA	Additional work upon approval by the ADC. Unit price shall include cost to complete, coordinate, and supervise a subcontractor or third party for service and repairs, not to exceed \$5,000.00. Compensation shall be based upon work completed.	\$ 5,000.00	\$ 5,000.00
<u>Total Base Bid (Items 1-7)</u>					
<u>Land Clearing and Fire Mitigation, Oahu</u>					

SUPPORTING COST OR PRICING DATA

The following cost or pricing data used to estimate the Base Bid, including all taxes, fees, and incidentals, must be completed for the Scope of Work.

1. Equipment

<u>Item</u>	<u>Hourly Rate</u>	<u>No. of hours (excluding operator)</u>	<u>Extension</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Labor

<u>Item</u>	<u>Hourly Rate</u>	<u>No. of hours</u>	<u>Extension</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Material

<u>Item</u>	<u>Unit Price</u>	<u>No. of units</u>	<u>Extension</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Overhead (If overhead is a fixed amount, insert total under "Extension")

<u>Item</u>	<u>Percentage</u>	<u>Base</u>	<u>Extension</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Other

	<u>Hourly Rate</u>	<u>No. of hours</u>	<u>Extension</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Extension Total: _____

(Extension Total should match Total Base Bid)

OFFEROR

Company Name

Signature

Name and Title of Person Authorized to Sign Offer

9/19/00

**WAGE CERTIFICATE
FOR SERVICE CONTRACTS**

Subject IFB No _____
Title of IFB _____

Agribusiness Development Corporation

Pursuant to Section 103-55, Hawaii Revised Statutes (HRS), I hereby certify that if awarded the contract in excess of \$25,000, the services to be performed will be performed under the following conditions

- 1 All applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety will be fully complied with, and
- 2 The services to be rendered shall be performed by employees paid at wages or salaries not less than the wages paid to public officers and employees for similar work, with the exception of professional, managerial, supervisory, and clerical personnel who are not covered by Section 103-55, HRS

I understand that failure to comply with the above conditions during the period of the contract shall result in cancellation of the contract, unless such noncompliance is corrected within a reasonable period as determined by the procurement officer. Payment in the final settlement of the contract or the release of bonds, if applicable, or both shall not be made unless the procurement officer has determined that the noncompliance has been corrected, and

I further understand that all payments required by Federal and State laws to be made by employers for the benefit of their employees are to be paid in addition to the base wage required by section 103-55, HRS.

Bidder _____
Signature _____
Title _____
Date _____

WAGE CERTIFICATE