BID SUBMISSION FORM NHTD Waiver Program Environmental Modifications

The purpose of this document is to ensure compliance with the NHTD Waiver criteria for Environmental Modifications. The purpose of this form is to establish the scope and criteria of the proposed project. In addition, an analysis of the proposed expenditures contained in the bid will be completed in compared to any and all bids received for the project in order to establish the best cost and completion of the project. All bidders are asked to fully complete the form and to provide the necessary certifications. Failure to do so, will invalidate the bid and prevent it from being considered as responsive to the call for bids.

SECTION 4: IDENTIFICATION OF DIDDED

SECTION 1. IDENTIFICATION OF BIDDER
NAME:
ADDRESS:
PHONE CONTACT:
E-MAIL CONTACT (if available):
NAME/TITLE OF AUTHORIZING OFFICER:
SIGNATURE OF AUTHORIZING OFFICER:
DATE:
SECTION 2: PROJECT IDENTIFICATION: RESIDENTIAL E-MOD
NAME OF APPLICANT/PARTICIPANT:
LOCATION OF WORK PROPOSED:
ANY OTHER E-MODS AT LOCATION OVER LAST 12 MONTHS?
YES; NO.
IF YES, WHAT WAS THE PROJECT TYPE AND AMOUNT?
AND ATTACH DETAIL.
SERVICE COORDINATOR:
CONTACT NUMBER:

SECTION 3: PROJECT WORK DETAIL. Please provide a detailed description of the approved E-MOD work to be undertaken including the estimated material costs, estimated labor costs, and estimated time from project start to completion.

MATERIALS REQUIRED: Please list materials required separately including amounts and costs for each category. For example, framing lumber, plywood or OSB, sheetrock, etc. Attach a Material Cost Sheet if necessary. Indicate the total material cost anticipated.

LABOR REQUIRED: Please list the anticipated number of workers, their skill category and compensation rates. For example, Master Carpenter, Laborer, plumber, etc, number of estimated hours and compensation rate per hour). Indicate number of hours for each category and the total labor outlay anticipated. Include a reasonable overhead and profit factor as well. Attach additional sheets if necessary.
SECTION 4: PROPOSED BID/COST OF THE PROJECT AS DESCRIBED: Including
all anticipated outlays for materials, labor, overhead, administrative costs and reasonable profits. Check the appropriate box and state the actual bid amount.
UNDER \$1000;\$1000-\$5000;\$5000-10,000;10,000-15,000;OVER \$15000*
STATE BID AMOUNT HERE: \$

SECTION 5: BIDDER CERTIFICATIONS: Failure to execute these certifications will result in the disqualification of the bid submitted.

*Bids over \$15,000 require additional approval from NYSDOH.

I am authorized to make the following certifications on behalf of the entity submitting this bid for consideration. I certify:

- 1. That I am fully qualified and, if required, licensed to perform the work required under the approved E-MOD as indicated above and will do the work using usual and customary accepted building practices within the resources provided under the bid as proposed; and,
- That all materials and products used during the conduct of the work and the completion of the project will meet any and all State of New York and/or local construction requirements; and,
- 3. That the project will be in compliance with the Safety Issues in Article 18 of the NY State Uniform Fire Prevention and Building Code and any applicable local Building Codes.
- 4. Further, I understand that work on the project may be periodically inspected while underway by New York State or local Building Inspectors and/or

representative staff of the NY State Department of Health or of the sponsoring Regional Center for compliance with the certifications above as well as the terms and conditions of the proposed work.

5. I further certify that I am fully authorized to make this certification and that any misrepresentations made in this submission will result in the rejection of the bid presented.

SIGNATURE: DA1	I E:
TITLE:	
ON BEHALF OF:	(Company or DBA name)
ADDRESS:	
PHONE:	
FIIONE.	
Date the Project will start:	
Anticipated date of completion:	