Hoffman S. BID: Replacement of In-Ground Lift in Existing Pit BID #: 18-08 DATE/TIME: 8/10/17 . 11:00 A.M. TOTAL BID AMOUNT OUESTIONNAIRE NON-COLLUSION AFFIDAVIT CORPORATE DISCLOSURE BUSINESS REGISTRATION CERTIFICATE AA AFFIDAVIT W-9 IRAN DISCLOSURE	-			
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CORPORATE DISCLOSURE BUSINESS REGISTRATION CERTIFICATE AA AFFIDAVIT W-9 IRAN DISCLOSURE			X	
BUSINESS REGISTRATION CERTIFICATE AA AFFIDAVIT W-9 IRAN DISCLOSURE	16			
BUSINESS REGISTRATION CERTIFICATE AA AFFIDAVIT W-9 IRAN DISCLOSURE		CORPORATE DISCLOSURE	×	
BUSINESS REGISTRATION CERTIFICATE AA AFFIDAVIT W-9 IRAN DISCLOSURE	18			
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IRAN DISCLOSURE	24			
35			×	
07	26			
27 BOARD MEETING AWARD DATE 8/22/2017*		SOARD MEETING AWARD DATE	8/22/2017*	artists.
28	28			

BID PROPOSAL FORM FOR REPLACEMENT OF IN-GROUND LIFT IN EXISTING PIT

THE UNDERSIGNED, as bidder, declares that the only person or parties interested in this proposal as principals are as named below, that this proposal is in all respects fair and without collusion or fraud; that he/she has carefully examined the General Conditions, the Specifications, the Contract, the Instructions to Bidders; and that he/she proposes and agrees that, if this proposal is accepted, he/she will enter into a Contract with the Township of Union Board of Education to furnish, deliver, and supply/install all equipment and/or materials, to do and perform all the work and labor required to be furnished and delivered specified in the Bid Specifications and Contract in the manner and time specified, and according to the requirements of the Township of Union Board of Education as therein set forth, and that he/she will take as full compensation for furnishing and delivering all materials, equipment and labor called for under these specifications complete in every detail for REPLACEMENT OF IN-GROUND LIFT IN EXISTING PIT, the lump sum price of:

\$ 90,000 or DOLLARS	(Bid Price in Writing)
	(Did i lice in witting)

Bidders are required to sign Bid Proposal Form:

Authorized Signature

Print Name and Title

)<u>|</u>27/17 Date

apped

EXCEPTIONS TO SPECIFICATIONS INCLUDED? [] YES YOO.

If Yes, include detailed explanation as required on Page(s) 7.

ARE SUB CONTRACTORS TO BE USED IN PROJECT? [] YES NO.

Sincerely,

What Sincerely,

John E. Tully, CPA
Acting Director

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252

TAXPAYER NAME:

HOFFMAN SERVICES, INC.

TAXPAYER IDENTIFICATION#:

221-615-339/000

ADDRESS:

55 E BIGELOW ST NEWARK NJ 07114

EFFECTIVE DATE:

01/01/57

ORM BRC(08-01)

TRADE NAME:

SEQUENCE NUMBER:

0115785

ISSUANCE DATE:

08/10/04

t must be

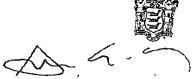
Certification

36063

CERTIFICATE OF EMPLOYEE INFORMATION REPORT

This is to certify that the contractor listed below that submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of 15-0CT-2011 to 15-0CT-2018

HOFFMAN SERVICES, INC. 55-57 EAST BIGELOW STREET NEWARK NJ 071



Andrew P. Sidamon-Erlstoff State Treasurer