

BID FORM

Project: Radiology/Cardiology Wing Renovation
Building 1, 1st Floor, East Wing
VA Project #689-CSI-161

Location: VA Connecticut Healthcare System
West Haven Campus
950 Campbell Avenue
West Haven, CT 06516

Scope of Work: _____

Work Area	Labor Cost	Material Cost	Total
VA Solicitation	\$	\$	\$
Philips Cath Lab #2	\$	\$	\$
Philips X-Ray #2	\$	\$	\$
Siemens X-Ray #1	\$	\$	\$
Total	\$	\$	\$

The bid strictly complies with Buy American Yes ___ No ___

The bid includes Davis Bacon Wages and Payroll Reporting Yes ___ No ___

The bid meets the Insurance Requirements Yes ___ No ___

List any deviations and substitutions. If none, please state "none".

List any clarifications. If none, please state "none".

Firm: _____

Contact: _____

Address: _____

Phone: _____

Email: _____

Signature: _____
Printed Name/Title

Date: _____