REQUEST FOR PROPOSALS

LAKE COUNTY ZONING & SUBDIVISION ORDINANCE AMENDMENT

March 20, 2019



2293 N. Main Street Crown Point, Indiana 46307 (219) 755-3700 www.lakecountyin.org

INTRODUCTION

The Advisory Lake County Plan Commission, Lake County Board of Commissioners, and Lake County Council have recently completed a new Comprehensive Plan for Unincorporated Lake County, Indiana.

The Advisory Lake County Plan Commission, cooperatively with the Lake County Board of Commissioners and Lake County Council, is announcing a Request for Proposals (RFP) from qualified consultants for an update/amendment to both its Zoning and Subdivision Ordinances for Unincorporated Lake County, Indiana. Both Ordinances may be located on the webpage identified below.

BACKGROUND

The Advisory Lake County Plan Commission is comprised of nine (9) members. The Commission oversees planning, zoning, land use, building, and other land planning activities and issues for the Unincorporated areas of Lake County, Indiana. For more information please visit the County's website at https://www.lakecountyin.org/portal/media-type/html/group/planning-commission/page/default.psml

PROPOSAL TIMELINE

Questions regarding RFP: Questions regarding the RFP should be submitted via email to kovacnx@lakecountyin.org by May 6, 2019, 10:00 AM (CST).

Answers to questions: 4:30 PM (CST), May 13, 2019

Deadline for submittals: 9:30 AM (CST), May 31, 2019

Proposal Evaluation: June 3, 2019 - June 14, 2019

Interviews: June 17, 2019 - June 28, 2019

Award Date: July 3, 2019

SCOPE OF WORK

Public Comment, Meetings & Presentations:

A Steering Committee of the Lake County Plan Commission has been established. The Steering Committee will be comprised of members with representatives from the County Commissioners, County Council, County Surveyor, and County Plan

Commission, with input from the Plan Commission Staff. Regularly scheduled meetings with the Steering Committee will be necessary throughout the update-making process to guide the development of the Ordinances. Steering Committee meetings will be held as needed prior to the Plan Commission and Board of Zoning Appeals meetings, which are held on the third Wednesday of the month, starting at 5:30 PM (CST). The Steering Committee may change the frequency and time of the meetings.

During the required public hearing, the consultant will be responsible for gathering any community input regarding the Zoning and Subdivision Ordinances. The Steering Committee will work with the consultant to determine the appropriate methods to integrate public input and comment.

The consultant is responsible for any presentation and project updates to the Steering Committee, Plan Commission, Board of Zoning Appeals, Board of Commissioners, and County Council if necessary.

Final Product:

The updated Zoning and Subdivision Ordinances will regulate land use for the Unincorporated areas of Lake County in accordance with all applicable Laws and Statutes in the State of Indiana, including I.C. 36-7-4-600 Series - Zoning Ordinance and I.C. 36-7-4-700 Series - Subdivision Control.

Both Ordinances should be in compliance with and promote the goals of the Comprehensive Plan for Unincorporated Lake County. Revisions and amendments to both Ordinances should increase ease of use and clarify requirements. The final product should include updated Zoning and Subdivision Text. The process should include a review and analysis of the existing ordinances with recommendations on updates to the Steering Committee. The Steering Committee will work with the consultant in making decisions regarding appropriate updates to the ordinance.

For example, the Planned Unit Development section of the Zoning Ordinance should be updated to include provisions for commercial and industrial developments. Other amendments may include changes to development regulations in existing zoning districts.

SUBMISSION REQUIREMENTS

Please submit (via mail or hand delivered) 5 hard copies, including one original signed copy and one electronic copy on a disc or flash drive to:

Board of Commissioners of the County of Lake c/o Lake County Auditor Lake County Auditor's Office Lake County Government Center, Second Floor Administration Building 2293 North Main Street Crown Point, Indiana 46307

Proposals should include the following:

- 1. A completed summary page (see attached form)
- 2. Name and contact information of the firm/individual
- 3. A full statement of the firm or individual's qualifications and those of all team members to be involved with the project
- 4. A complete description of experience working on similar projects
- At least three references for which the firm/ individual has completed similar projects
- 6. A proposed timeline for completion of the project
- 7. Itemized schedule of fees
- 8. Completed copies of County Forms 9-14 and 95 (see attached)

RIGHT TO REJECT PROPOSALS

The selection committee reserves the right to reject all proposals or to withdraw the RFP at any time.

Lake County, Indiana Zoning & Subdivision Ordinance Request for Proposals Summary Page

Name of Firm:	
Primary Contact:	
Address:	
Phone Number:	
Email Address:	
Website:	

Itemized Schedule of Fees

Item	Description	Amount
	0.0000000000000000000000000000000000000	
Total Amount:		

GENERAL INSTRUCTIONS TO QUOTERS

I. MATERIAL INCLUDED

- A. SPECIFICATION
- B. ATTACHMENT A
- C. BID FORM 95 FOR MATERIALS, EQUIPMENT, GOODS OR SUPPLIES, OR BID FORM 96 FOR PROJECTS THAT INVOLVE CONSTRUCTION, LABOR, OR BOARD OF WORKS PROJECTS, OR BID FORM 91 FOR BLANK BOOKS, BLANKS, STATIONERY AND PRINTING.
- D. COUNTY FORM 8 GENERAL INSTRUCTIONS TO QUOTERS
- E. COUNTY FORM 9 QUOTERS AFFIDAVIT OF GENERAL INSTRUCTIONS AND SPECIFICATIONS TO QUOTERS
- F. COUNTY FORM 10 QUOTERS AFFIDAVIT OF EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION
- G. COUNTY FORM 11 PRICE PREFERENCE SELECTION
- H. COUNTY FORM 12 QUOTER TOTAL SHEET
- I. COUNTY FORM 13 QUOTER INFORMATION QUESTIONNAIRE
- J. COUNTY FORM 14 QUOTER TOTAL CONTENTS
- K. BID FORM _____
- L. OTHER PLEASE SPECIFY _____

II. SUBMIT THE QUOTE ON TIME

ALL QUOTES MUST BE SUBMITTED BEFORE 9:30 A.M. ON

III. SUBMIT THE QUOTE TO THE PROPER OFFICIAL

ALL QUOTES SHALL BE MADE OUT TO THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE C/O LAKE COUNTY AUDITOR, AND MAILED OR DELIVERED TO THE LAKE COUNTY AUDITORS OFFICE, LAKE COUNTY GOVERNMENT CENTER, SECOND FLOOR, ADMINISTRATION BUILDING, 2293 NORTH MAIN STREET, CROWN POINT, INDIANA 46307.

IV. INCLUDE ALL OF THE REQUIRED ITEMS IN THE QUOTE PACKET

- <u>ITEM 1</u> BID FORM
- item 2 Affidavit of General Instructions and Specifications to
 QUOTERS (COUNTY FORM 9)

- ITEM 4 PRICE PREFERENCE SELECTION (COUNTY FORM 11)
- ITEM 5 QUOTER TOTAL SHEET (COUNTY FORM 12)
- ITEM 6 QUOTER INFORMATION QUESTIONNAIRE (COUNTY FORM 13)
- <u>ITEM 7</u> ANY OTHER ITEM REQUIRED BY SPECIFICATIONS (YOU MUST CONSULT THE SPECIFICATIONS FOR ANY ADDITIONAL ITEMS!!!)

V. SUBMIT A PROPERLY IDENTIFIED QUOTE

- A. EACH QUOTE MUST BE SUBMITTED IN A SEPARATE SEALED ENVELOPE.
- B. EACH ENVELOPE MUST BE CLEARLY MARKED IN THE LEFT HAND BOTTOM CORNER WITH THE FOLLOWING INFORMATION:
 - a. IDENTIFY THE OFFICE OR DEPARTMENT FOR WHICH THE QUOTE IS BEING SUBMITTED.
 - b. IDENTIFY THE QUOTE OR CLASS TYPE FOR WHICH THE QUOTE IS BEING SUBMITTED.
- C. THE QUOTERS NAME AND ADDRESS MUST BE CLEARLY WRITTEN ON THE TOP LEFT SIDE OF THE QUOTE ENVELOPE.
- D. IF MORE THEN ONE QUOTE IS SUBMITTED, EACH QUOTE MUST BE IN A SEPARATE ENVELOPE.

VI. SUBMIT QUOTES BY CLASS

- A. FOR EACH QUOTE THERE ARE ONE OR MORE CLASSES LISTED IN THE SPECIFICATIONS.
- B. THE CONTRACT WILL BE AWARDED TO THE LOWEST RESPONSIBLE AND RESPONSIVE QUOTER FOR EACH CLASS. THE FOLLOWING ARE APPLICABLE DEFINITIONS:
 - 1. RESPONSIBLE QUOTER MEANS ONE WHO IS CAPABLE OF PERFORMING THE CONTRACT REQUIREMENTS FULLY AND WHO HAS THE INTEGRITY AND RELIABILITY THAT WILL ASSURE GOOD FAITH PERFORMANCE.
 - 2. RESPONSIVE QUOTER MEANS ONE WHO HAS SUBMITTED A QUOTE CONFORMING IN ALL MATERIAL RESPECTS TO THE SPECIFICATIONS.

VII. MOST FREQUENT REASONS WHY THE OFFICE OF THE COUNTY ATTORNEY RULES THAT QUOTES MUST BE REJECTED

A. FAILURE TO SUBMIT THE QUOTE ON THE PROPER FORM

- 1. THE STATE BOARD OF ACCOUNTS SPECIFIES WHICH BID FORM MUST BE USED.
- 2. THE PROPER BID FORM IS IDENTIFIED IN PARAGRAPH I ON PAGE 1 OF THESE INSTRUCTIONS.

B. FAILURE TO SIGN THE BID FORM IN THE TWO (2) REQUIRED PLACES:

- 1. SIGNATURE IS REQUIRED ON THE NON-COLLUSION AFFIDAVIT.
- 2. SIGNATURE IS REQUIRED ON THE CONTRACT/PROPOSAL SECTION.

C. FAILURE TO HAVE THE BID NOTARIZED:

THE NON-COLLUSION AFFIDAVIT MUST BE NOTARIZED.

- D. <u>FAILURE TO SUBMIT, COMPLETE, AND PROPERLY EXECUTE THE QUOTERS</u>
 <u>AFFIDAVIT OF GENERAL INSTRUCTIONS AND SPECIFICATIONS TO</u>
 QUOTERS (COUNTY FORM 9).
 - 1. COUNTY FORM 9 MUST BE SIGNED.
 - 2. COUNTY FORM 9 MUST BE NOTARIZED.
- E. FAILURE TO SUBMIT, COMPLETE, AND PROPERLY EXECUTE THE QUOTERS AFFIDAVIT OF EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION (COUNTY FORM 10).
 - 1. COUNTY FORM 10 MUST BE SIGNED.
 - 2. COUNTY FORM 10 MUST BE NOTARIZED.
- F. FAILURE TO SUBMIT, COMPLETE, AND PROPERLY EXECUTE THE PRICE PREFERENCE SELECTION (COUNTY FORM 11).
 - 1. COUNTY FORM 11 MUST BE SIGNED.
 - 2. COUNTY FORM 11 MUST BE NOTARIZED.

G. <u>FAILURE TO SUBMIT, COMPLETE, AND PROPERTY EXECUTE THE QUOTER</u> TOTAL SHEET (COUNTY FORM 12).

- 1. COUNTY FORM 12 MUST BE SIGNED.
- 2. COUNTY FORM 12 MUST BE NOTARIZED.
- THE TOTAL FOR ALL CLASSES MUST BE ENTERED.
- THE TOTAL MUST BE EITHER TYPED OR WRITTEN IN INK OR BALL POINT. NO PENCIL ENTRIES ARE PERMITTED AND THERE CAN BE NO ERASURES OR CORRECTIONS MADE IN THE "TOTAL ALL CLASSES" SECTION.
- 5. ANY PRICE PREFERENCE AUTHORIZED UNDER INDIANA LAW MUST BE CLAIMED BY CHECKING THE APPROPRIATE BOX AT THE BOTTOM OF COUNTY FORM 12.

H. <u>FAILURE TO SUBMIT, COMPLETE, AND PROPERLY EXECUTE THE QUOTER</u> INFORMATION OUESTIONNAIRE (COUNTY FORM 13).

- 1. COUNTY FORM 13 MUST BE FULLY COMPLETED.
- COUNTY FORM 13 MUST BE TYPEWRITTEN OR PRINTED ONLY.

I. FAILURE TO BE IN GOOD STANDING

- 1. ANY INDIVIDUAL, PARTNERSHIP, OR CORPORATION FROM OUT OF THE STATE QUOTING ON AN ITEM OR PROJECT SHALL FURNISH PROOF UPON REQUEST SATISFACTORY TO THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE THAT THEY OR IT ARE IN GOOD STANDING AND ARE AUTHORIZED TO DO BUSINESS IN THE STATE OF INDIANA.
- 2. CORPORATIONS MUST BE IN GOOD STANDING WITH THE SECRETARY OF STATE OF INDIANA AND MUST BE AUTHORIZED TO DO BUSINESS IN THE STATE OF INDIANA.
- 3. ANY BUSINESS UNIT USING AN ASSUMED NAME MUST HAVE FILED AN ASSUMED NAME CERTIFICATE IN ACCORDANCE WITH I.C. 23-15-1-1.
- J. <u>FAILURE TO BE CURRENT WITH THE PAYMENT OF REAL AND/OR PERSONAL PROPERTY TAXES:</u>

- 1. THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE SHALL REFER ALL QUOTES TO THE LAKE COUNTY TREASURER PRIOR TO THEIR BEING AWARDED.
 - 2. THE LAKE COUNTY TREASURER SHALL REVIEW ALL CURRENT TAX DELINQUENCIES TO ASCERTAIN WHETHER OR NOT A POTENTIAL VENDOR WHO WOULD BE AWARDED A QUOTE OWES MONEY TO THE COUNTY.
 - 3. IF THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE IS NOTIFIED BY THE LAKE COUNTY TREASURER THAT A POTENTIAL VENDOR IS ON THE MOST RECENT TAX WARRANT LIST OR IS DELINQUENT IN ANY FASHION IN PAYMENT OF PERSONAL, REAL ESTATE, OR OWES OTHER TAXES TO THE COUNTY, THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE SHALL NOT AWARD THE CONTRACT TO THE QUOTER UNTIL:
 - A. THE VENDOR PROVIDES TO THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE WITHIN TEN (10) DAYS OF RECEIVING NOTICE OF DELINQUENCY FROM THE TREASURER, A STATEMENT FROM THE LAKE COUNTY TREASURER VERIFYING AND INDICATING THAT THE VENDOR'S NAME HAS BEEN REMOVED FROM THE DELINQUENT TAX LIABILITY LIST THROUGH THE PAYMENT OF THE TAXES.
 - b. THE BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE SHALL FORWARD A COPY OF ALL CONTRACTS AWARDED BY THE COUNTY TO THE LAKE COUNTY AUDITOR. THE LAKE COUNTY AUDITOR, IF A VENDOR BECOMES DELINQUENT, SHALL WITHHOLD FROM THE DELINQUENT VENDOR CONTRACT PAYMENT, THE AMOUNT OF TAXES THAT BECOME DELINQUENT TO THE AWARDING OF THE CONTRACT.
 - C. THE AUDITOR SHALL PERIODICALLY DEDUCT FROM A VENDOR'S PAYMENT THE AMOUNT OF TAXES OWED THAT ARE DELINQUENT UNTIL SUCH TIME AS THE DELINQUENCIES ARE PAID.

K. FAILURE TO COMPLY WITH ANY OTHER LAW APPLICABLE TO QUOTES:

A QUOTE WILL BE REJECTED FOR ANY REASON NOT SPECIFIED ABOVE THAT REQUIRES QUOTE REJECTION IN ACCORDANCE WITH LOCAL, STATE, AND/OR FEDERAL LAW, REGULATION, STATUTE, OR ORDINANCE.

QUOTERS AFFIDAVIT

OF GENERAL INSTRUCTIONS AND SPECIFICATIONS TO QUOTERS

THIS IS TO ACKNOWLEDGE, THAT
OF , HAS READ
THE GENERAL INSTRUCTIONS TO QUOTERS (COUNTY FORM 8) AND SPECIFICATIONS
FOR THE QUOTE PREPARED BY THE BOARD OF COMMISSIONERS OF THE COUNTY OF
LAKE AND UNDERSTANDS ALL OF THE ITEMS LISTED IN THE GENERAL INSTRUCTIONS
AND SPECIFICATIONS.
SIGNED:
COMPANY NAME
COMPANY REPRESENTATIVE SIGNATURE
SUBSCRIBED AND SWORN TO BEFORE ME, A NOTARY PUBLIC IN AND FOR SAID
COUNTY AND STATE, THIS DAY OF 20
NOTARY PUBLIC MY COMMISSION EXPIRES:
RESIDENT OFCOUNTY

QUOTERS AFFIDAVIT

OF EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION

OF	THIS IS TO ACKNOWLEDGE, THAT
1.	HAS ADOPTED A POLICY OF EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION IN ALL ASPECTS OF EMPLOYMENT;
2.	DOES NOT IN ITS HIRING, ADVANCEMENT, PROMOTION, OR ANY OTHER CONDITION OF EMPLOYMENT DISCRIMINATE BY REASON OF AGE, MILITARY SERVICE, RACE, RELIGION, COLOR, PHYSICAL HANDICAP, POLITICAL AFFILIATION, SEX, NATIONAL ORIGIN, OR ANCESTRY.
3.	CERTIFIES THAT ITS AFFIRMATIVE ACTION AND EQUAL EMPLOYMENT PROGRAM IS CURRENT AND IN COMPLIANCE WITH ALL APPLICABLE FEDERAL/STATE/LOCAL LAWS AND INTERPRETATIVE COURT DECISIONS.
4.	ACKNOWLEDGES THAT IF AWARDED THE CONTRACT, BREACH OF ANY FEDERAL/STATE/LOCAL EQUAL EMPLOYMENT OR AFFIRMATIVE ACTION PROVISION OF THE UNITED STATES OF AMERICA, THE STATE OF INDIANA, OR THE COUNTY OF LAKE MAY BE REGARDED AS A MATERIAL BREACH OF THE CONTRACT.
5.	AGREES TO PROVIDE TO THE COUNTY OF LAKE A COPY OF ITS EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION PROGRAM WITHIN TEN (10) DAYS OF RECEIPT OF A WRITTEN REQUEST.
6.	AGREES TO SUBMIT TO THE COUNTY OF LAKE, AFFIRMATIVE ACTION OFFICER, UPON REQUEST AND PRIOR TO AWARDING OF THE CONTRACT WRITTEN INFORMATION REGARDING THE MINORITY OWNERSHIP OF THE COMPANY.
	SIGNED:
	COMPANY NAME
	COMPANY REPRESENTATIVE SIGNATURE
	CRIBED AND SWORN TO BEFORE ME, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, THIS DAY OF 20
NOTAR	RY PUBLIC
MY CC	DMMISSION EXPIRES:
RESID	DENT OF COUNTY

QUOTERS AFFIDAVIT OF PRICE PREFERENCE SELECTION

I.	LOCA	L BUSINESS PRICE PREFERENCE
	A.	This vendor qualifies for the local business preference under
		IC 5-22-15-20.9 because (please indicate with an "X").
		The principle place of business is in Lake, Porter,
		Newton, or Jasper County.
		The majority of the businesses payroll is paid to
		residents of Lake, Porter, Newton, or Jasper County.
		The majority of the businesses employees reside in Lake,
		Porter, Newton, or Jasper County.
	В.	The Vendor claims the following local business price
		preference based on the vendor's total bid (please indicate
		with an "X").
		Five 5% percent on the total bid with is less than
		\$50,000.00.
		Three 3% percent on the total bid which between \$50,000
		but less than \$100,000.
II.		One 1% percent on the bid which is \$100,000 or more.
	CRIT	ERIA FOR AN INDIANA SMALL BUSINESS
	A.	This vendor is an Indiana small business as defined in IC 5-
		22-14-1 because the vendor (please indicate with an "X").
		Is independently owned and operated, and
		Is not dominant in its field of operation.
	В.	This vendor meets both of the criteria in II. A. above and
		also meets the following criteria (vendor may select only one
		of the following by placing an "X").
		Is a wholesale business with annual sales in the most
		recent fiscal year less than \$4,000,000.
		Is a construction business with average annual receipts
		for the preceding three fiscal years less than
		\$4,000,000.
		Is a retail business or a business selling services with
		annual sales and receipts less than \$500,000 Is a manufacturing business with less than 100
		employees.

III. PRODUCT COMPOSITION PRICE PREFERENCES

Α.	A vendor can claim thi claimed the Indiana sm	_							
В.	Product composition prone of the following h	rice	pre	ference	(vendo:				
	Ten 10% percer materials.					16	for	recy	cled
	Ten 10% percent based ink.	unde	er	IC 5-22	-15-18	for	soy	bear	oil
	Twenty 20% percent								
	produce Ten 10% percent quality inspection					7 f	or i	ndoor	air
		S	IGN	IED:					
		Ċ	OMF	PANY NAM	E				
		c	:OME	ANY REP	RESENTA	rivi	s sig	NATUI	RE
SUBSCRIBE	D AND SWORN TO BEFORE	ME,	A	NOTARY	PUBLIC	IN	AND	FOR	SAID
COUNTY AN	D STATE, THIS	DAY	OF					20 _	·
NOTARY PU	BLIC								
MY COMMIS	SION EXPIRES:				 				
RESIDENT	OF	. <u> </u>		COUN	JTY				

QUOTER TOTAL SHEET

CLASS NUMBER	DESCRIPTION	CLASS TOTAL
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	TOTAL ALL CLA	SSES
	TOTAL ALL CLA	\$

/|\ //\

THE TOTAL FOR ALL CLASSES MUST BE ENTERED OR QUOTE WILL BE REJECTED

Affidavit by Contractor. By execution of this document I swear under the penalties of perjury that my company does not knowingly employ an unauthorized alien.

SIGNED:	
COMPANY NAME	
COMPANY REPRESENTATIVE SIGNATURE	
SUBSCRIBED AND SWORN TO BEFORE ME, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, THIS DAY OF20	·
NOTARY PUBLIC	
MY COMMISSION EXPIRES: COUNTY	

QUOTER INFORMATION QUESTIONNAIRE

•	ETURNED WITH THE QUOTE PACKET. <u>To be</u>
<u>TYPEWRITTEN OR PRINTED ONLY.</u>	
PLACE A CHECK MARK BY THE ONE THAT APP	
A) SOLE PROPRIET	ORSHIP
IS YOUR COMPANY: B) PARTNERSHIP	
C) CORPORATION	
	E INDICATE BELOW THE COMPANY NAME AND
ADDRESS AS IT APPEARS WITH THE INDIANA S	ECRETARY OF STATE'S OFFICE, CORPORATIONS
DIVISION.	
COMPAN	NY NAME
ADD	DRESS
ADD	DRESS
CITY OTATE	AND ZID CODE
INDICATE BELOW THE COMPANY ADDRESS	AND ZIP CODE INDICATE BELOW THE COMPANY ADDRESS
WHERE YOU WOULD LIKE ORDERS DIRECTED:	
WHERE TOO WOOLD LIKE ORDERS DIRECTED.	WILDRE TOO WOODD EIRETTTIMENT REMITTED
COMPANY NAME	COMPANY NAME
ADDRESS	ADDRESS
ADDRESS	ADDRESS
CITY, STATE AND ZIP CODE	CITY, STATE AND ZIP CODE
INDICATE BELOW THE NAME OF THE REPRES	SENTATIVE OR REPRESENTATIVES FROM YOUR
COMPANY THAT THE COUNTY OF LAKE SHOULI	O CONTACT DURING THE COURSE OF THIS QUOTE
TO PLACE ORDERS, SEEK INFORMATION, ETC.,	ALSO INDICATE THEIR TELEPHONE NUMBER(S)
AND FAX NUMBER(S).	
COMPANY REPRESENTATIVE NAME	COMPANY REPRESENTATIVE NAME
TELEPHONE NUMBER	TELEPHONE NUMBER
	PAY MUMPED
FAX NUMBER	FAX NUMBER

QUOTER PACKET CONTENTS

COMPA	NY NAME:		
COMPA	NY ADDRESS:		
COMPA	NY CITY/STATE/ZIP:		
COMPA	NY TELEPHONE NUMBER:		
FOR I	E INDICATED ITEMS ARE NOT IN MMEDIATELY NOTIFYING THE L.		
	-	NUMBER	COMPANY REPRESENTATIVE
	ITEM	OF COPIES	SIGNATURE
1.	SPECIFICATION		
2.	ATTACHMENT A		
3.	COUNTY FORM 8 - GENERAL INSTRUCTIONS TO QUOTERS		
4.	COUNTY FORM 9 - QUOTERS AFFIDAVIT OF GENERAL INSTRUCTIONS AND SPECIFICATIONS TO QUOTERS		
5.	COUNTY FORM 10 - QUOTERS AFFIDAVIT OF EQUAL EMPLOYMENT AND AFFIRMATIVE ACTION		
6.	COUNTY FORM 11 - PRICE PREFERENCE SELECTION		
7.	COUNTY FORM 12 - QUOTER TOTAL SHEET		
8.	COUNTY FORM 13 - QUOTER INFORMATION QUESTIONNAIRE		
9.	BID FORM NUMBER []		
10.	OTHER - PLEASE SPECIFY		

Prescribed by the State Board of Accounts Form No. 95 (Revised 1997)

Bid, Offer or Proposal for Sale or Lease of Materials

(Defined at I.C. 36-1-2-9.5)

(Please type or print)

				Date:	3 9	
1. Gove	ernmental Unit:					_
2. Cour	nty:	1-100-17-11-11-11-11		V		900-11009
3. Bìdd	er (Firm):					
Ad	dress:					
Cil	y/State:					
4. Telep	hone Number:	**************************************				
5. Ager	nt of Bidder (if a	pplicable)				
Pursuant to not	ices given, the o	undersigned offers		which specify the class of	or item number or desc	oription, quantity,
specified will render price stated in his b	r such bid void a oid for the mater ertified check o	as to that class or it rials included in sai or bond shall be file	tem. Bidder pr id bid. Bidder ed with each t	nce with specifications. A romises that he has not off further agrees that he will pid if required, and liability e.	fered nor received a le not withdraw his bid	ss price than the from the office in
				Signature of Bidder	or Agent	
Bid Offer or Attach separate he bid format:	40 000000000000000000000000000000000000	each item bid base	d on specific	alions published by gove	rning body. Following	is an example of
Class or Item	Quantity	Unit		Description	Unit Price	Amount
	T	I				
agent of the firm, or with any person rela o refrain from bidd combination with ar	ed bidder or age ompany, corpor ative to the price ing, and that th by other person to that no person	ent, being duly swo ration or partnersh e to be bid by anyon is bid is made with in reference to suc n or persons, firms	ip represente ne at such lett nout reference ch bidding. , or corporatio	ays that he has not, nor he d by him, entered into any ing nor to prevent any per e to any other bid and with on has, have or will receiv	y combination, collusi son from bidding nor l hout any agreement, t	on or agreement to induce anyone understanding or
5 1/2	Ξ					
				Bidder (Firm)		
				Signature of Bidder	r or Agent	
Subscribed and	d sworn to befo	re me this	day of		. 20	
Outsouribus and						
				Notary Public		
My Commission Ex	pires:					
County of Residence	e:					
,						
Acceptance						
There now being	g sufficient und	bligated appropria	ited funds ava	ilable, the contracting aut	hority of	
				or classes or items number		
and promises to pa	y ine undersign	ea bidder upon de	nivery the pric	e quoted for the materials	supulated in said bid.	
Contracting Aut	hority Memb	ers:		Date:		

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Form

1987)			rials -2-9.5)	IE FOLLOWING		EPTED, WRITE
Form No. 95 (Revised 1987)	Gontractor)	(Contractor) (Address)	For Sale or Lease of Materials (Defined at I.C. 36-1-2-9.5)	Filed, 20 THIS BID ACCEPTED FOR THE FOLLOWING CLASSES OR ITEMS this day of 20	P.O. No.	Date IF NO PART OF BID IS ACCEPTED, WRITE