

## Township of Ear Falls Equipment Tender 2017 – Bid Form

I, \_\_\_\_\_ am submitting a bid for the  
(First and Last Name or Business Name)  
following equipment in the amount noted in the "Bid Amount" column:

<b>Equipment</b>	<b>Minimum Bid</b>	<b>Bid Amount</b>
Breathing Air Compressor	\$5,000 + HST	_____ + HST
LaFrance Antique Fire Truck	\$5,500 + HST	_____ + HST
Wild Fire Unit	\$4,000 + HST	_____ + HST

I have enclosed a 20% bid deposit in the form of a bank draft or money order.

My contact information is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

I understand that HST will be charged in addition to the bid amount.

I understand that if my bid is successful, I will have until September 15, 2017 at 4:00 p.m. to submit full payment. Full payment will be submitted to the Municipal Office (2 Willow Crescent; P.O. Box 309; Ear Falls, ON; P0V 1T0).

I understand that once full payment has been made, I have until September 22, 2017 at 2:30 pm to remove the equipment from the Wellair Building Shop Yard (4 Roy St. Ear Falls, ON) and that I am only able to pick up equipment during regular operating hours (Monday to Friday from 6:30 am to 2:30 pm).

\_\_\_\_\_  
Signature