RFB MT235820025 ATTACHMENT 2 (BID FORM)

IMPORTANT: Bids must be submitted on this form. You may also submit an attachment to this form describing your Proposal, if necessary.

CONTRACTOR INFORMATION					
Company Legal Name					
Company d/b/a if applicable					
Address					
Email					
Phone / Fax					
Federal Tax ID Number					
CONTACT IN	ORMATION FOR INDIVIDUAL SUBMITTING BID				
Name					
Email					
Phone / Fax					

Description	QTY	Container size	Service Frequency	Cost(\$/month)
Trash Removal	12	8 cuyd	Weekly	

Description	QTY	Container	Service Frequency	Cost(\$/month)
Single Stream	3	8 cuyd	Every other	Cost(\$/month)
Recycling			week	
	6	8 cuyd	Monthly	

Description	QTY	Container size	Service Frequency	Cost(\$/month)
Rolloff (State owned)	1	20 yard	As Needed	