

## Retrofit Grants Documentation of CONTRACTOR BIDS



Use this form to submit documentation required for your Construction Grant.

## YOUR INFORMATION

Name:									
Phone	ne #: E-mail:								
ADDR	ESS OF BUILDI	NG TO BE RETROFITTEI	D						
	Ş	STREET		CITY	STATE	≣ .	ZIP		
contra		quires that applicants for <i>Cons</i> eligible for this program. Appl of Berkeley.		•		` '			
the sta	te of California. Co	of the property owner to sele sts incurred for services perfo ram website and Reimbursen	rmed with	out a valid an	d current	license canno			
	•	did you contact? You must try receive from contractors? To			` '	at least two (	(2) bids.		
	ractor?	ies of at least two bids to this	form, alon	g with the sig	ned contra	act with your	selected		
	Yes	No, explain:							
<b>4.</b> For	each contractor yo	u contacted, provide the follow	ving inform	nation. Attach	additional	l pages if nec	essary.		
	COMPANY NAME	CONTACT PERSON N	IAME			I received a pr from this cont			
						I selected this	contractor.		
	DATE OF CONTAC	T METHOD OF CONT (phone, email, etc.		BID AMOUNT	Г				

Continue to reverse side of form.

COMPANY NAME	CONTACT PERSON NAME		I received a proposal from this contractor.
			I selected this contractor.
DATE OF CONTACT	METHOD OF CONTACT (phone, email, etc.)	BID AMOUNT	
COMPANY NAME	CONTACT PERSON NAME		I received a proposal from this contractor.
			I selected this contractor.
DATE OF CONTACT	METHOD OF CONTACT (phone, email, etc.)	BID AMOUNT	
COMPANY NAME	CONTACT PERSON NAME		I received a proposal from this contractor.
			I selected this contractor.
DATE OF CONTACT	METHOD OF CONTACT (phone, email, etc.)	BID AMOUNT	
COMPANY NAME	CONTACT PERSON NAME		I received a proposal from this contractor.
			I selected this contractor.
DATE OF CONTACT	METHOD OF CONTACT (phone, email, etc.)	BID AMOUNT	

If you selected the lowest bidder, stop here. You do not need to complete the rest of the form. Provide the City copies of all bids and your signed contract.

**5.** If you did not select the lowest bid, please provide an explanation for how you selected the contractor for your project:

**1947 Center Street, 3rd Floor, Berkeley, CA 94704** Tel: 510.981.7475 or 510.981.7451 TDD: 510.981.7474 E-mail: <a href="mailto:retrofitgrants@cityofberkeley.info">retrofitgrants@cityofberkeley.info</a> www.cityofberkeley.info/retrofitgrants Rev. 08/25/2020