

---

# CITY OF SAN ANTONIO

---

**Project Name: Storm Water Outfall Repairs (Re-bid)**  
**ID NO.: 33-00036**

**Date Issued: May 11, 2015**

**The estimated construction budget for this contract is \$836,972.00**

**Page 1 of 1**

---

**20**

## BID FORM

### I. BASE BID

Amount of San Antonio International Airport (SAIA) Outfall Repair Base Bid (Insert Amount in Words and Numbers):

\_\_\_\_\_ \$ \_\_\_\_\_

Amount of SAWS Water Base Bid (Insert Amount in Words and Numbers):

N/A \_\_\_\_\_ \$ \_\_\_\_\_ N/A

Amount of SAWS Sewer Base Bid (Insert Amount in Words and Numbers):

N/A \_\_\_\_\_ \$ \_\_\_\_\_ N/A

Amount of CPS Base Bid (Insert Amount in Words and Numbers):

N/A \_\_\_\_\_ \$ \_\_\_\_\_ N/A

**Total Amount of Base Bid (Insert Amount in Words and Numbers):**

\_\_\_\_\_ \$ \_\_\_\_\_

### II. ALTERNATES

Amount of each Alternates (if applicable) insert in Numbers:

Additive Alternate #1 - Stinson Municipal Airport (SMF) Outfall Repairs

**Total Amount of Bid for Additive Alternate #1 (Insert Amount in Words and Numbers):**

\_\_\_\_\_ \$ \_\_\_\_\_

### III. UNIT PRICES

Bidders shall submit unit pricing on the 025 Unit Pricing form, and it shall be attached immediately following this sheet.

### IV. ALLOWANCES (if applicable) N/A

\_\_\_\_\_  
Official Name of Company (legal)

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Address

\_\_\_\_\_  
Fax No.

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
E-mail Address

Name of the proposed **Project Manager:** \_\_\_\_\_

Name of the proposed **Site Superintendent:** \_\_\_\_\_