

CITY OF NORTH LITTLE ROCK, ARKANSAS
COMMERCE DEPARTMENT
Mary Beth Bowman, Director
Amy Smith, Assistant Director for Procurement
Crystal Willis, Admin. Sect./Assistant Purchasing Agent



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INVITATION TO BID/PROPOSAL COVER SHEET

Bid Number : _____ 15-3360 _____ Date Issued: _____ August 30, 2015

Date & Time Bid Opening: _____ Tuesday, September 22, 2015 at 10:00 a.m.

NORTH LITTLE ROCK HEALTH UNIT W.I.C. REMODEL

A five percent (5%) bid bond must be submitted with this bid.

The complete set of bidding and contract documents may be examined at the office of Stocks-Mann Architects, PLC, 401 W. Capitol, Suite 402, Little Rock, Arkansas or at Southern Reprographics, 901 W. 7th Street, Little Rock, Arkansas. Prime Bidders may obtain up to three (3) sets of the bidding and contract documents from Southern Reprographics by providing a deposit check in the amount of \$50.00 per set, payable to Stocks-Mann Architects, PLC. Deposits will be refunded to all Prime Bidders who return the documents in good condition within ten (10) days after the opening of bids. A Bidder receiving a contract award may retain the documents and the Bidder's deposit will be refunded. Prime Bidders requiring additional sets and subcontractors may purchase the documents through Southern Reprographics directly.

A pre-bid conference for all bidders will be held at the North Little Rock Health Unit, 2800 Willow Street, North Little Rock, Arkansas on Tuesday, September 8, 2015 at 10:00 a.m.

The City of North Little Rock encourages participation of small, minority, and woman own business enterprises in the procurement of goods, services, professional services, and construction, either as a general contractor or sub-contractor. It is further requested that whenever possible, majority contractors who require sub-contractors, seek qualified small, minority, and woman businesses to partner with them.

EXECUTION OF BID

Upon signing this page, the organization certifies that they have read and agree to the requirements set forth in this bid including conditions set forth and pertinent information requests.

Name of Firm: _____ Phone No.: _____

Tax Identification No.: _____

Business Address: _____

Signature of Authorized Person: _____

Title: _____ Date: _____

UNSIGNED BID COVER SHEET WILL BE REJECTED.