

**CITY OF CHEHALIS
SPECIFICATIONS AND BID PROPOSAL FOR CHLORINE
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Record of Safety Violations occurring during the preceding five- (5) year period:

Supplemental Specifications: (Bidder: Please feel free to enter in this portion of the form any additional information you wish to convey regarding your particular bid.)

BIDDER NAME, BUSINESS ADDRESS
AND PHONE:

24-HOUR CONTACT NUMBER
IN CASE OF EMERGENCY:

SIGNATURE AND TITLE OF
AUTHORIZED AGENT:

PRINTED NAME:

***THE CITY OF CHEHALIS RESERVES THE RIGHT TO REJECT ANY OR ALL BIDS AND TO
AWARD THE BID IN THE BEST INTEREST OF THE CITY OF CHEHALIS.***