



Lapeer County Road Commission

Lawn Maintenance Bid

Total Cost Per Cut/Trim May-June: \$ _____

Total Cost Per Cut/Trim July-October: \$ _____

Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Telephone: (_____) _____

By my signature on this document, I hereby state that all of the information I have provided is true, accurate and complete. I hereby state that I have not communicated with, nor otherwise colluded with any other bidder, nor have I made any agreement with, nor offered or accepted anything of value from any official or employee of the Lapeer County Road Commission. I have included a copy of my certificate of insurance with proof of the required liability and workers compensation insurance.

Signature: _____

Date: _____