



Newaygo County Road Commission

935 EAST ONE MILE ROAD
WHITE CLOUD, MI 49349
Phone (231) 689-6682
Fax (231) 689-5994
www.newaygoroads.org

NOTICE TO BIDDERS

Sealed bids will be received by the Board of County Road Commissioners of Newaygo County, at their office at 935 East One Mile Road, White Cloud, MI 49349, until Wednesday, January 17, 2018 by 8:00 a.m. for the following:

➤ **Grader Blades**

Specifications and bid forms may be obtained at the office of the Newaygo County Road Commission during regular business hours or by visiting our website at www.newaygoroads.org

All proposals must be on Road Commission furnished bid forms and submitted in sealed envelopes, plainly marked as to item bid and shall bear the name of the bidder.

The Newaygo County Road Commission hereby notifies all bidders that it will affirmatively insure that in any contract entered into pursuant to this advertisement, disadvantaged business enterprise will be afforded full opportunity to submit bids in response to this invitation and will not be discriminated against on the grounds of sex, race, color or national origin in consideration for an award.

The Board reserves the right to accept or reject any or all bids, to waive any irregularities in the bids and to make award in any manner they deem to be in the best interest of Newaygo County.

**BOARD OF COUNTY ROAD COMMISSIONERS
OF
NEWAYGO COUNTY**

**Douglas Harmon, Chairman
Louis J. Meeuwenberg, Vice-Chairman
William Gonyon, Commissioner**



BID FORM – GRADER BLADES

Due by 8:00 a.m. on Wednesday, January 17, 2018

Submitted to: Board of County Road Commissioners
of Newaygo County
935 East One Mile Road
White Cloud, MI 49349

Bids will be accepted for the following:

ITEM	QUANTITY	PRICE PER PIECE	TOTAL PRICE
CSB 3/4" X 6" X 72" (5/8" bolt hole) thru hardened	500	_____	_____
CDB 3/4" X 6" X 72" (5/8" bolt hole) thru hardened	500	_____	_____

DELIVERY DATE: _____

Companies wishing to bid alternative material for consideration are encouraged to do so.

NAME OF BIDDER _____

SIGNED: _____

ADDRESS _____

TELEPHONE _____

FAX _____

EMAIL _____

DATE _____