

APPENDIX B – BID SUBMISSION FORM

IFB Watauga County Emergency Services Facility Furniture

SUBMIT WITH BID

This Bid is submitted by:

Company Legal Name: _____
Representative Name: _____
Representative Signature: _____
Representative Title: _____
Address: _____
City/State/Zip: _____
Email Address: _____
Phone Number: _____
Website Address: _____

It is understood that Watauga County reserves the right to reject any and all Bids, to make awards according to the best interest of the County, to waive formalities, technicalities, to recover and re-bid this project. Bid is valid for 60 calendar days from the Bid due date and is submitted by an executive of the company that has authority to contract with Watauga County, NC.

Name: _____
Title: _____
Signature: _____
Date: _____