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|  | **2021 State Truck Aggregate** |  |
|  | **BID PRICE FORM** |  |
|  | **Mining Permit #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  | Use a separate sheet for each **QUARRY** that you make as a bid  offer. Do not alter this form accept for the required information. |  |
| **MATERIAL NUMBER:** | **COMMODITY:** | **UNIT PRICE/TON** |
| 101000850 | ABC |  |
| 101000850 | ABC (RECYCLED MATERIAL) |  |
| 101002770 | ABC SLATE |  |
| 101002775 | ABC (GRANITE) |  |
| 101000900 | ABC M |  |
| 101000925 | ABC S (SPECIAL) |  |
| 101002762 | AGGREGATE SHOULDER BORROW (ASB) |  |
| 101001110 | NO. 14 M |  |
| 101000940 | NO. 4 |  |
| 101001350 | NO. 467 |  |
| 101000950 | NO. 5 (**SUBSTITUTE WITH NO. 57 WHEN APPROVED BY USER)** |  |
| 101001190 | NO. 57 (**SUBSTITUTE WITH NO. 5 WHEN APPROVED BY USER)** |  |
| 101002764 | NO. 57 (GRANITE), (**SUBSTITUTE WITH NO. 5 WHEN APPROVED**  **BY USER)** |  |
| 101001200 | NO. 67 |  |
| 101001000 | NO. 6 M |  |
| 101001250 | NO. 78 M |  |
| 101001425 | AGGREGATE, RAILROAD BALLAST, NO. 3 |  |
| 101001427 | AGGREGATE, RAILROAD BALLAST, NO. 4 |  |
| 101001160 | AGGREGATE SA |  |
| 101001500 | AGGREGATE, SCREENING (STANDARD) |  |
| 101002800 | AGGREGATE, SCREENING (WASHED) |  |
| 101003436 | CLASS III, TYPE 3 SELECT MATERIAL |  |
| 101003500 | CLASS 1 RIP RAP |  |
| 101003550 | CLASS 2 RIP RAP |  |
| 101003335 | CLASS 2 RIP RAP (GRANITE) |  |
| 101004400 | CLASS A STONE 2"-6" (1042-1 SPEC) |  |
| 101004410 | CLASS B STONE 5"-12" (1042-1 SPEC) |  |
| 101002950 | CLASS B STONE 5"-12" (1042-1 SPEC) GRANITE |  |
| 101003338 | SNOW / ICE CONTROL (2MS / CLASS III, TYPE 3) |  |
| 101003700 | SAND 1-S (NATURAL) |  |
| 101003760 | SAND 2-MS |  |
| 101003750 | SAND 2-S (NATURAL) |  |

# \*\*\*Please enter information pertaining to each quarry for which a bid is submitted.

|  |  |  |  |
| --- | --- | --- | --- |
| **STOCKPILE/QUARRY NAME:** | |  | |
| **STREET ADDRESS:** | | **PO BOX: ZIP:** | |
| **CITY & STATE & ZIP:** | | **TELEPHONE NUMBER: TOLL FREE TEL. NO.** | |
| **QUARRY SUPERVISOR NAME** | | **FAX NUMBER:** | |
| **E-MAIL:** | **DATE:** | |  |