

Middle Line Housing Community Housing

Town of Chilmark

April 22, 2010

October 28, 200 4:30 PM

FILED SUB-BID: Section #

Bidder	Amount	Acknowledge Addendum	DCAM Cert. & Update Statement	Restrictions	Bid Deposit & Type (bond/check/cash)
1 John W. Egan Co, Inc PO Box 600670 Newtonville, MA 0246	\$64,700	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 a-e <input type="checkbox"/> 4 <input type="checkbox"/> 5	<u>DCAM CERT</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cert <u>UPDATE</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TO: FROM: NONE MARKED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Bond <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> OSHA <input type="checkbox"/> Non Collusion <input checked="" type="checkbox"/> Tax Compliance
		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 a-e <input type="checkbox"/> 4 <input type="checkbox"/> 5	<u>DCAM CERT</u> <input type="checkbox"/> Yes <input type="checkbox"/> No Cert <u>UPDATE</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	TO: FROM:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Bond <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> OSHA <input type="checkbox"/> Non Collusion <input type="checkbox"/> Tax Compliance
		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 a-e <input type="checkbox"/> 4 <input type="checkbox"/> 5	<u>DCAM CERT</u> <input type="checkbox"/> Yes <input type="checkbox"/> No Cert <u>UPDATE</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	TO: FROM:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Bond <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> OSHA <input type="checkbox"/> Non Collusion <input type="checkbox"/> Tax Compliance
		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 a-e <input type="checkbox"/> 4 <input type="checkbox"/> 5	<u>DCAM CERT</u> <input type="checkbox"/> Yes <input type="checkbox"/> No Cert <u>UPDATE</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	TO: FROM:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Bond <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> OSHA <input type="checkbox"/> Non Collusion <input type="checkbox"/> Tax Compliance