PRRIP – ED OFFICE FINAL



REQUEST FOR QUOTATION

PROJECT:	(P21-008) Tract 2009003 Off-channel Sand and Water Habitat Rehabilitation
	and water nabitat Kenabilitation
LOCATION:	PRRIF Tract 2009003
NEAR:	Overton, Nebraska
REQUEST DATE:	March 31, 2021
CLOSING DATE:	April 6, 2021– 1:00 pm central time
CONTACT:	Tim R. Tunnell, Senior Land Manager
	Headwaters Corporation
	4111 4 th Ave, Suite 6
	Kearney, NE 68845
	tunnellt@headwaterscorp.com

The undersigned acknowledges receipt of the following plans and specifications:

#1 (___) Sheet 1 – Tract 2009003 Off-channel Sand and Water Habitat Rehabilitation

Project Objective: Both predator fences and the south neighbors pivot point in the crop field have an accumulation of blow sand that needs to be removed from the base of the fence (off buried fence) and relocated to designated areas for habitat enhancement on OCSW areas, spoil area NE of the cabin and around the southern edge of the sandpit as shown on map. The smooth area south of the West Predator fence also needs blow sand removed and smoothed out and overseed with annual rye (approximate area of 1.5 acres). The objective is to remove 2-6" (or close to original grade as possible) of blow sand and relocate to the spoil areas. Work must be completed prior to April 15th.

Item No.	Description	Unit	Hourly Rate	Estimated Quantity	
1	Total Mobilization/Demobilization	LS	N/A	1	\$
2*		Hour	\$		\$
3*		Hour	\$		\$
4*		Hour	\$	·	\$
5*		Hour	\$		\$
6*		Hour	\$	·	\$
L			<u> </u>	TOTAL	\$

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* List and describe equipment planning to use with hour rates and estimated time.

WORK COMPLETION DATE: _____

THIS QUOTE SUBMITTED BY: An Iı

THIS QUOTE SUBMITTED BY:	DATE:
An Individual	
Name (typed or printed):	
By:	(SEAL)
(Individual's s	
Doing business as:	
A Partnership	
Partnership Name:	(SEAL)
Ву:	
(Signature of general partne	er - attach evidence of authority to sign)
Name (typed or printed):	
A Corporation	
-	
Corporation Name:	(SEAL)
State of Incorporation:	
Type (General Business, Professional, Service, Lim	nited Liability):
By:	
(Signature - attach evidend	
Name (typed or printed):	
Title:	
	(CORPORATE SEAL)
Attest:	
(Signature of Corpo	
CONTACT INFORMATION:	

Bidder's Business Address: _____

Phone:	Email:	

