

# **BIDDER'S CHECKLIST**

Company Name \_\_\_\_\_

Please indicate you have completed the following documentation and submit them in the following order.

## **ITEM DESCRIPTION**

## Check

- Bidder's Checklist
- Bidder's Information
- Bidder's Price Proposal Form
- Addenda Acknowledgement Form
- Partnership Affidavit (if applicable)
- □ Corporate Affidavit (if applicable)
- □ Individual Affidavit (if applicable)
- □ Certificate of Non-Collusion

Authorized Signature	Date
Printed Name	
Title	
Email	



# **BIDDER'S INFORMATION FORM**

FULL INDIVID	OUAL'S NAME				
			OR		
LEGAL BUSIN					
INDICATE LEC	GAL FORM OF BUSIN	NESS:			
	Corporation	Partnership	Individual	Other (specify)	
ADDRESS					
	Street		City	State	Zip Code
AUTHORIZED	SIGNER				
		Name		Title	
PRIMARY CO	NTACT				
		Name	Phone		Email
SECONDARY	CONTACT				
		Name	Phone		Email
COMPANY W	/EBSITE				
(if applicable)					



#### ITB# 22-12-006 Sale of County Owned Real Property Bidder's Price Proposal Form

Please list your best bid below for each Property for which you are interested. Bids will be considered nonnegotiable as related to acceptance and resulting award. Please list N/A on the properties in which you are not entering a bid.

Property Name	Bid Amount
Property A: 10 Court Street Watkinsville, Ga 30677	\$
Property B: 3 Third Street Watkinsville, Ga 30677	\$

#### Initial:

\_\_\_\_\_ The undersigned agrees, if the bid amount for Property "A" or Property "B" is accepted or any combination of Property bids are accepted by Oconee County and a Notice of Award is issued on any combination of Property bids, this bid amount shall become the purchase and sale price for the Property as awarded and shall be the sum due to Oconee County by the undersigned Bidder to purchase the said Property.

Bidder acknowledges that upon receipt of Notice of Award, I as the successful Bidder bear all costs of closing (in addition to the bid amount), shall be responsible for submitting a non-refundable cash deposit in the amount of 5% (five percent) of each Property purchase bid amount within two (2) days of Notice of Award, and shall submit the full bid amount, less the deposit, to the County at closing. I further acknowledge that the closing is to be arranged by the Bidder and conducted by an attorney hired by the Bidder which is experienced in real estate matters and acceptable by Oconee County. I further acknowledge that the closing must take place in Oconee County, Georgia.

The undersigned individual(s) executing this Bid Form represents that he/she is either submitting this bid on his or her own behalf or is the legally authorized representative or agent of the person, individual, firm, company or governmental entity submitting this bid and that he/she has the full legal power and authority to sign this Bid Form, submit this bid on their behalf, and to consummate the transaction and purchase contemplated by this Bid Form and the Invitation to Bid, including submission of the purchase price at closing and execution of any certifications, acknowledgements and agrees that this bid will be binding and enforceable upon Bidder and that a legally binding agreement will be created if the bid is accepted by Oconee County and a Notice of Award is issued to the Bidder. The execution, delivery and performance of this Bid Form by the Bidder has been duly authorized and approved by all necessary action on the part of the Bidder.

This \_\_\_\_\_\_ day of \_\_\_\_\_, 2022.

If the Bid Form is submitted by a person in an individual capacity, please print the name of the individual submitting this Bid Form, provide the requested information and sign below to acknowledge and indicate your understanding of the terms of this Bid Form and agreement to be bound by its terms and conditions:

Signature	Address
Name – Printed	City/State/Zip Code
Date	Phone
	Email

If the bid is submitted by a company, firm, corporation, association, partnership or governmental entity, please print the name of the individual submitting the bid, provide the requested information and sign below to acknowledge and indicate your understanding of the terms of this Bid Form and agreement of behalf such company, firm, corporation, association, partnership or governmental entity to be bound by its terms and conditions:

Business Name - Printed	Address
Authorized Signer, Title – Printed	City/State/Zip Code
Signature	Phone
Date	Email

THIS PAGE MUST BE COMPLETED AND SUBMITTED WITH PROPOSAL



## ADDENDA ACKNOWLEDGEMENT

The Respondent has examined and carefully studied the Invitation to Bid and the following Addenda, receipt of all of which is herby acknowledged:

Authorized Signature	Date
Addendum Number	Date

Printed Name

Respondent must acknowledge any issued addenda. Bids which fail to acknowledge the Respondent's receipt of any addenda may result in the rejection of the bid if the addendum contains information that substantively changes the Owner's requirements.



# Partnership Certificate

STATE OF	}				
COUNTY OF	} SS }				
On this day of	, 20	_ before me	personally appeared		
known to me to be the person who	o executed th	ne above instru	iment, who, being by first duly sworn, did	depose	e and say
the he is a general partner in the firr	n of		and that firm co	nsists o	of himself
and				and	that he
executed the foregoing instrument	on behalf of s	said firm for th	e uses and purposes stated therein, and tha	t no or	ne except
the above named members of the f	irm have any	financial inter	est whatsoever in said proposed contract.		
PARTNER			PARTNER		
PARTNER			PARTNER		
Subscribed and sworn to before me	e, this o	day of	, 20		
			NOTARY PUBLIC		
My Commission Expires:			(SEAL)		
	(Date)				

NOTE: if only one partner signs, a power of attorney executed by all other partners authorizing him to act in the name of the Company must be attached, otherwise, all partners must sign.



# Corporate Certificate

l, in	, certify that I am the Secretary of the Corporation named as CONTRACTOR								RACTOR	
the foregoin	ng bid; tha	at			,	who	signed	said b	oid o	n behalf
on the CONT	RACTOR was t	then				of said	Corpora	tion; tha	it said	authority
was duly sign	ed for and in	behalf of said	Corporati	on by aut	hority of	its Boar	d of Dire	ectors, a	nd is	within the
scope of it	s corporate	powers; that	said Co	rporation	is organ	ized un	der the	laws o	f the	State of
This	_day of		, 20							

CORPORATE SECRETARY

(SEAL)



# **Individual Certificate**

STATE OF	} } SS							
COUNTY OF	}							
On this day of		, 20	, before	me	personally	came	and	appeared
		to me l	nown, and l	known	to me to the	e person	descri	ibed in and

who executed the foregoing instrument and acknowledged that executed the same.

NOTARY PUBLIC

(SEAL)

My Commission Expires:

\_\_\_\_\_ (Date)



# **CERTIFICATE OF NON-COLLUSION**

SALE OF COUNTY OWNED REAL PROPERTY ITB# 22-12-006 STATE OF GEORGIA OCONEE COUNTY BOARD OF COMMISSIONERS

Being first duly sworn, deposes and says that he is

(sole owner, partner, president, secretary, etc.)

the party making the forgoing Proposal or Bid; that such ITB is genuine and not collusive or sham; that said Respondent has not colluded, conspired, connived, or agreed, directly or indirectly, with any Respondent or person, to put in a sham Response, or that such other person shall refrain from Responding, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the Response price of affiant or any other Respondent, or to fix any overhead, profit or cost element of said Response Price, or of that of any other Respondent, or to secure any advantage against Oconee County, or any other person interested in the proposed Agreement; and all statements in said Proposal or Bid are true; and further, that such Respondent has not, directly or indirectly, submitted this Response, or the contents thereof, or divulged information or data relative thereto any association or to any member or agent thereof.

#### (Affiant)

Subscribed and Sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_.

(Notary Public in and for)

(County)

My Commission expires \_\_\_\_\_, 20\_\_\_\_\_.

(SEAL)