



BOND REQUEST/EXECUTION FORM

FAX TO: SKILLINGS SHAW & ASSOCIATES FAX: (207)753-7310
 103 PARK STREET, 2ND FLOOR PHONE: (207)753-7300
 P.O. BOX 481
 LEWISTON, ME 04243-0481

CONTRACTOR: _____

ADDRESS: _____

ORDERED BY: _____

PROJECT OWNER (OBLIGEE): _____

ADDRESS: _____

CONTRACT OR PROJECT NO.: _____

PROJECT DESCRIPTION & LOCATION: _____

DATE BOND IS NEEDED BY: _____

DELIVERY INSTRUCTIONS

CALL WHEN READY PHONE# _____ REGULAR MAIL _____

OVERNIGHT FED EX# _____ UPS# _____

BID BOND

BID DATE: _____

SPECIAL BOND FORM? _____ (PLEASE ATTACH)

ESTIMATE: _____

BID GUARANTEE: _____

COMPLETION TIME: _____

LIQUIDATED DAMAGES: _____

RETAINAGE: _____ %

AMT SUBCONTRACTED: _____ %

SUBCONTRACTED TRADES: _____

WORK ON HAND \$ _____ EST. _____

PERFORMANCE/PAYMENT BOND

CONTRACT DATE: _____

BOND DATE: _____

CONTRACT PRICE: \$ _____

PERFORMANCE: _____ % PAYMENT: _____ %

NO. OF ORIGINALS: _____

PLEASE FURNISH A COPY OF THE CONTRACT

BID RESULTS

1ST BID: _____

2ND BID: _____

3RD BID: _____

SURETY COMPANY: _____

BID BY: _____ DATE: _____ PER: _____

CONDITIONS: _____

Bonds...just Bonds!