

## **INVITATION TO BID FORM**

Submitted By:

\_\_\_\_\_  
(Bidder's Name)

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

Dear Commissioners:

This Bid is submitted in accordance with your advertisement inviting Bids to be received for the project identified as:

**INVITATION TO BID #001608-1467A**

**FOR**

**Tax Claim Return & Claim/Sale Notice Postings and Personal Service**

**FOR**

**CHESTER COUNTY**

Having carefully examined the Invitation to Bid together with all addenda applying thereto, and being familiar with the various conditions affecting the work, the undersigned hereby agrees to furnish all materials, perform all labor, and do all else necessary to complete the work in strict accordance with the Invitation to Bid, for prices as follow:

**SEE FOLLOWING PAGES**

## **BID PRICE PAGE**

### **Tax Claim Return & Claim/Sale Notice Postings and Personal Service**

Bidder's Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Having thoroughly reviewed and agreeing to the Invitation to Bid in its entirety, the work site plus any Addendum issued, agree to provide all labor and materials necessary and as specified to complete all of the work as required herein, as follows:

SERVICE	(A) PRICE PER ATTEMPT	(B) APPROX. # POSTINGS/YEAR	(C) TOTAL ESTIMATED COST (A)x(B)
Return and Claim Notice Posting	\$	2300	\$
Notice of Sale Posting	\$	450	\$
Personal Service Attempts	\$	1050	\$
GRAND TOTAL BID AMOUNT:			

**NOTES:**

- A Bid Bond in the amount of ten percent (10%) of the **Grand Total Bid** amount must be submitted to the County Controllers Office before the bid opening date/time.
- A Performance Bond and a Labor and Material Bond, each in the amount of one hundred percent (100%) of the Grand Total Bid amount, and a one-year warranty must be submitted by the successful bidder within ten (10) days from the bid award date.
- All items must be bid.
- No substitutions will be accepted.

## **SIGNATURE PAGE**

In case this Invitation to Bid is accepted, the undersigned is hereby bound to commence and complete all of the work included under his contract in such time and manner as designated for the various items he has contracted to supply.

In submitting this Invitation to Bid it is understood that the unrestricted right is reserved by the County to reject any and all bids or parts thereof, or to waive any informalities or technicalities in said Invitations to Bid, and it is agreed that this bid may not be withdrawn for a period of sixty (60) days from date of opening hereof, except as pursuant to statute.

The undersigned hereby certifies that this Invitation to Bid is genuine, and not a sham or collusive, or made in the interest or in behalf of any person, firm or corporation not herein named; that the undersigned has not directly or indirectly induced or solicited any bidder to refrain from bidding, and that the undersigned has not, in any manner, sought by collusion to secure for himself an advantage over any other bidder.

AUTHORIZED SIGNATURE\_\_\_\_\_\*\*

TYPED NAME & TITLE\_\_\_\_\_

FIRM NAME\_\_\_\_\_

OFFICIAL ADDRESS\_\_\_\_\_

\_\_\_\_\_

FEDERAL ID #\_\_\_\_\_ TELEPHONE #\_\_\_\_\_

FAX #\_\_\_\_\_ E-MAIL ADDRESS\_\_\_\_\_

Bidder will check whether the bid is by an individual ( ), partnership ( ), or corporation ( ).

### **Acknowledgement of Receipt of Addenda**

The Bidder hereby acknowledges receipt of the following Addenda that have been made part of this Invitation to Bid:

<u>Number</u>	<u>Dated</u>	<u>Initials of Bidder</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **BID GUARANTY IS MANDATORY**

Accompanying this Invitation to Bid is (check one) a certified or cashier's check ( ); bid bond ( ) in the amount of \$\_\_\_\_\_. The amount of this deposit is based on a grand total bid of \$\_\_\_\_\_.

**\*\*SIGNATURE PAGE MUST BE SIGNED FOR CONSIDERATION\*\***

## **INSTRUCTIONS FOR NON-COLLUSION AFFIDAVIT**

1. This Non-Collusion Affidavit is material to any contract awarded pursuant to this bid. According to the Pennsylvania Antibid-Rigging Act, 73 P.S. 1611 et seq., governmental agencies may require Non-Collusion Affidavits to be submitted together with bids.
2. This Non-Collusion Affidavit must be executed by the member, officer or employee of the bidder who makes the final decision on prices and the amount quoted in the bid.
3. Bid rigging and other efforts to restrain competition, and the making of false sworn statements in connection with the submission of bids are unlawful and may be subject to criminal prosecution. The person who signs the Affidavit should examine it carefully before signing and assure himself or herself that each statement is true and accurate, making diligent inquiry, as necessary, of all other persons employed by or associated with the bidder with responsibilities for the preparation, approval, or submission of this bid.
4. In the case of a bid submitted by a joint venture, each party to the venture must be identified in the bid documents, and an Affidavit must be submitted separately on behalf of each party.
5. The term "complementary bid" as used in the Affidavit has the meaning commonly associated with that term in the bidding process and includes the knowing submission of bids lower than the bid of another firm, any intentionally low or noncompetitive bid, and any other form of bid submitted for the purpose of giving a false appearance of competition.
6. Failure to file an Affidavit in compliance with these instructions may result in disqualification of the bid.

# NON-COLLUSION AFFIDAVIT

Contract/Bid No. 001608-1467A

State of \_\_\_\_\_: \_\_\_\_\_: S.S.  
County of \_\_\_\_\_:

I state that I am \_\_\_\_\_ of \_\_\_\_\_  
Title Name of Firm

and that I am authorized to make this affidavit on behalf of my firm, and its owners, directors, and officers. I am the person responsible in my firm for the price(s) and the amount of this bid.

I state that:

- 1) The price(s) and amount of this bid have been arrived at independently and without consultation, communication or agreement with any other contractor, bidder, or potential bidder.
- 2) Neither the price(s) nor amount of this bid, and neither the approximate price(s) nor approximate amount of this bid, have been disclosed to any other firm or person who is a bidder or potential bidder, and they will not be disclosed before bid opening.
- 3) No attempt has been made or will be made to induce any firm or person to refrain from bidding on this contract, or to submit a bid lower than this bid, or to submit any intentionally low or noncompetitive bid or other form of complementary bid.
- 4) The bid of my firm is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive bid.
- 5) \_\_\_\_\_, its affiliates,  
Name of firm

subsidiaries, officers, directors, and employees are not currently under investigation by any governmental agency and have not in the last four years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to bidding on any public contract, except as follows:

I state that \_\_\_\_\_ understands and  
Name of firm

acknowledges that the above representations are material and important and will be relied on by Chester County in awarding the contract(s) for which this bid is submitted. I understand and my firm understands that any misstatement in this affidavit is and shall be treated as fraudulent concealment from Chester County of the true facts relating to the submission of bids for this contract.

\_\_\_\_\_  
Name and Company Position

SWORN TO AND SUBSCRIBED  
BEFORE ME THIS \_\_\_\_\_ DAY  
OF \_\_\_\_\_, 2026

\_\_\_\_\_  
Notary Public

My Commission Expires

## **REFERENCE PAGE**

1.      COMPANY NAME: \_\_\_\_\_  
            ADDRESS: \_\_\_\_\_  
                                 \_\_\_\_\_  
  
TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_
2.      COMPANY NAME: \_\_\_\_\_  
            ADDRESS: \_\_\_\_\_  
                                 \_\_\_\_\_  
  
TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_
3.      COMPANY NAME: \_\_\_\_\_  
            ADDRESS: \_\_\_\_\_  
                                 \_\_\_\_\_  
  
TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_
4.      COMPANY NAME: \_\_\_\_\_  
            ADDRESS: \_\_\_\_\_  
                                 \_\_\_\_\_  
  
TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_
5.      COMPANY NAME: \_\_\_\_\_  
            ADDRESS: \_\_\_\_\_  
                                 \_\_\_\_\_  
  
TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

## **JOINT PURCHASING ACCEPTANCE FORM**

1.0 **Joint Purchases with Municipalities and Other Participating Entities:** In accordance with the provisions of Act of July 12, 1972, No. 180, P.L. 762, as amended, of the Commonwealth of Pennsylvania, the County of Chester has adopted a resolution which permits participating municipalities to purchase off contracts for goods, materials or equipment entered into by the County. The County has also enacted an Ordinance in accordance with the provisions of the Act of December 19, 1996, P.O. 1158, No. 177, Section I which authorizes joint purchases with private or parochial schools and human services agencies (such as member libraries of the Chester County Library System) on contracts which the County has awarded for its own purposes. Bidders understand and agree to the following:

- 1.1 The purchase requirements of the participating municipalities, schools, or non-profit human services agencies (referred to hereafter as "participating entities") are not included in the quantities shown in the bid package.
- 1.2 Participating entities are to be offered the same prices, terms, and conditions as those contained in any agreement between the County and the successful bidder resulting from this bid, including direct delivery to their facility.
- 1.3 Participating entities will be responsible for placing and payment of their orders directly with the successful bidder.
- 1.4 The County of Chester will not be responsible in any way for any order placed by a participating entity.
- 1.5 All members of the Southeastern Pennsylvania Counties Cooperative Purchasing Board and other participating entities are to be offered the same prices, terms, and conditions as those contained in any agreement between the County and the successful bidder resulting from this bid, including direct delivery to their facility.

Please indicate your acceptance or non-acceptance:

\_\_\_\_\_ **I will** offer this purchase contract in accordance with the Intergovernmental Agreement Act, as amended of the Commonwealth of Pennsylvania until the earlier of the contract termination date (if applicable), or \_\_\_\_\_.

\_\_\_\_\_ **I will not** offer this purchase contract in accordance with the Intergovernmental Agreement Act, as amended of the Commonwealth of Pennsylvania.



# PA CHILD PROTECTIVE SERVICES COMPLIANCE VERIFICATION FORM

Date: \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contractor: \_\_\_\_ Subcontractor: \_\_\_\_ (check one)

Contract/Bid/Project Number: \_\_\_\_\_

Project Description: \_\_\_\_\_

Project Location: \_\_\_\_\_

As a contractor/subcontractor for the above referenced County of Chester project, I hereby acknowledge that performance of this job may cause me or my employees to have direct contact with children.

**Furthermore, I affirm that our company will comply with Pennsylvania's Child Protective Services Law regarding clearance requirements (23 Pa.C.S.A. §6344) for all employees who will work on this job.**

This includes, but is not limited to, obtaining the following clearances for every employee who will enter County of Chester property to work on this project:

- Pennsylvania Child Abuse History Clearance (Childline)
- Federal Bureau of Investigation (FBI) Criminal History Record
- Report of criminal history from the Pennsylvania State Police

These clearances must be obtained prior to the employee beginning work on this project unless the requirements for provisional employment have been met pursuant to 23 Pa.C.S.A. §6344(m). Should staffing requirements change during performance of the job, the requisite clearances shall be obtained for any new personnel before they can begin employment. These clearances must be renewed every 60 months.

The County of Chester reserves the right to request and inspect, at any time, the clearances for any employee that has worked on the project, is working on the project, or will be working on the project. Should our company fail to provide clearances for that employee, that employee must immediately cease work until clearances are obtained.

I acknowledge that failure to comply with the provisions of the Child Protective Services Law may result in criminal action against our company. In addition, a violation will constitute breach of contract and the contract may be terminated by the County of Chester.

I, \_\_\_\_\_, authorized representative of the company above, attest that the information contained in this verification form is true and correct and understand that the submission of false or misleading information in connection with the above verification shall be subject to sanctions provided by law.

\_\_\_\_\_  
Authorized Representative Signature

## **CONTRACTOR QUALIFICATION STATEMENT**

**THE UNDERSIGNED** certified under oath the truth and correctness of all statements and of all answers to questions made hereinafter.

**SUBMITTED TO:** County of Chester  
Department of Procurement and General Services

**ADDRESS:** 313 W. Market Street  
Suite 4402  
P.O. Box 2748  
West Chester, PA 19380-0991

**SUBMITTED BY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRINCIPLES NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_  
(If different than above) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHECK** – Corporation ☐, Partnership ☐, Individual ☐, Joint Venture ☐, Other ☐

Dun and Bradstreet Number: \_\_\_\_\_

**1.0** How long has your organization been in business as a Contractor? \_\_\_\_\_

**2.0** How many years has your organization been in business under its present name? \_\_\_\_\_

**2.1** Under what other or former names has your organization operated?

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

**3.0** If you are a corporation, please answer the following:

**3.1** Date of incorporation: \_\_\_\_\_

a. State of incorporation: \_\_\_\_\_

b. President's Name: \_\_\_\_\_

c. Vice president's Names: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

d. Secretary's Name: \_\_\_\_\_

e. Treasurer's Name: \_\_\_\_\_

**4.0** If an Individual or a Partnership, answer the following:

4.1 Date of organization: \_\_\_\_\_

4.2 Name and address of all partners (State whether General or Limited Partnership):

\_\_\_\_\_  
\_\_\_\_\_  
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**5.0** If other than a corporation or Partnership, describe organization and name Principles:

\_\_\_\_\_  
\_\_\_\_\_

**6.0** List the States and the categories in which your organization is legally qualified to do business. Indicate registration or license numbers if applicable.

\_\_\_\_\_  
\_\_\_\_\_

**7.0** Organization normally performs the following type of work: \_\_\_\_\_

**8.0** Have you ever failed to complete any contract work that was awarded to you?

Yes ☐ No ☐

If you answered YES, fully describe the circumstances surrounding the failure.

- 9.0** Are you currently involved, or have you been involved during the past 5 years with any litigation with any current or previous customer either as a plaintiff or defendant?

Yes ☐ No ☐

If your answer was YES, state the nature and status of the litigation and the stated reason for the dispute.

- 10.0** Within the last five years, has any Officer or Partner of your organization been an Officer or Partner of any organization that defaulted on a contract? Yes ☐ No ☐

If YES, attached a separate sheet explaining the default.

- 11.0** How would you best describe your company? \_\_\_\_\_

\_\_\_\_\_

How many employees are currently on your company payroll?

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

- 12.0** On a separate sheet of paper, list all major contracts that your organization has in process giving the Name of the Project, the Owner's Name, the Architect, the Contract Amount, Percent Complete, and the Scheduled Completion Date.

- 13.0** On a separate sheet of paper, list the major projects your organization has completed in the past five years giving the Name of the Project, the Owners Name, the Date of Completion, and the Contract Amount.

- 14.0** On a separate sheet of paper, list the experience of the key individuals of your organization.

- 15.0** On a separate sheet of paper, list the equipment that your organization owns, or rents Annotate the type and the quantities of the equipment that you intend to use on this job site.

- 16.0** Trade References:

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17.0 Bank References:

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18.0 Name of Bonding Company with the name and address of agent:

Name: \_\_\_\_\_

Agent: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18.1 Current bonding capacity available to contractor: \$\_\_\_\_\_

19.0 Dated at: \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 2026

Name of  
Organization: \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

20.0 M \_\_\_\_\_ BEING  
DULY SWORN DEPOSES AND SAYS THAT HE/SHE IS THE \_\_\_\_\_ OF \_\_\_\_\_  
\_\_\_\_\_ AND THAT THE ANSWERS TO THE FOREGOING  
QUESTIONS AND ALL STATEMENTS THEREIN CONTAINED ARE TRUE AND CORRECT.

SWORN TO AND SUBSCRIBED  
BEFORE ME THIS \_\_\_ DAY  
OF \_\_\_\_\_, 2026

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

**CONSENT (OR AGREEMENT) OF SURETY**

The undersigned \_\_\_\_\_, a corporation organized and existing  
Name of Surety Co.  
under the laws of the State of \_\_\_\_\_ and authorized to do business in the  
State of Pennsylvania, does hereby consent and agree with The County of Chester  
that if the proposal of \_\_\_\_\_ for  
Name of Bidder  
\_\_\_\_\_  
Title and Name of Bid  
be accepted and a contract for said work be awarded to the said \_\_\_\_\_,  
Name of Bidder  
it will, upon its being so awarded, become surety for the said \_\_\_\_\_  
Name of Bidder  
on such surety bonds as are called for in the bid specifications.

Signed and Sealed \_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Surety Co.

By: \_\_\_\_\_  
Attorney-in-Fact



**COMMONWEALTH OF PENNSYLVANIA**  
**PUBLIC WORKS EMPLOYMENT VERIFICATION FORM**

Date\_\_\_\_\_

Business or Organization Name (Employer)\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip Code\_\_\_\_\_

☐ Contractor ☐ Subcontractor (check one)

Contracting Public Body\_\_\_\_\_

Contract/Project No\_\_\_\_\_

Project Description\_\_\_\_\_

Project Location\_\_\_\_\_

As a contractor/subcontractor for the above referenced public works contract, I hereby affirm that as of the above date, our company is in compliance with the Public Works Employment Verification Act ('the Act') through utilization of the federal E-Verify Program (EVP) operated by the United States Department of Homeland Security. To the best of my/our knowledge, all employees hired post January 1, 2013, are authorized to work in the United States.

It is also agreed to that all public works contractors/subcontractor will utilize the federal EVP to verify the employment eligibility of each new hire within five (5) business days of the employee start date throughout the duration of the public works contract. Documentation confirming the use of the federal EVP upon each new hire shall be maintained in the event of an investigation or audit.

I,\_\_\_\_\_, authorized representative of the company above, attest that the information contained in this verification form is true and correct and understand that the submission of false or misleading information in connection with the above verification shall be subject to sanctions provided by law.

\_\_\_\_\_  
Authorized Representative Signature



## WORKER PROTECTION AND INVESTMENT CERTIFICATION FORM

A. Pursuant to Executive Order 2021-06, *Worker Protection and Investment* (October 21, 2021), the Commonwealth is responsible for ensuring that every worker in Pennsylvania has a safe and healthy work environment and the protections afforded them through labor laws. To that end, contractors and grantees of the Commonwealth must certify that they are in compliance with Pennsylvania's Unemployment Compensation Law, Workers' Compensation Law, and all applicable Pennsylvania state labor and workforce safety laws including, but not limited to:

1. Construction Workplace Misclassification Act
2. Employment of Minors Child Labor Act
3. Minimum Wage Act
4. Prevailing Wage Act
5. Equal Pay Law
6. Employer to Pay Employment Medical Examination Fee Act
7. Seasonal Farm Labor Act
8. Wage Payment and Collection Law
9. Industrial Homework Law
10. Construction Industry Employee Verification Act
11. Act 102: Prohibition on Excessive Overtime in Healthcare
12. Apprenticeship and Training Act
13. Inspection of Employment Records Law

B. Pennsylvania law establishes penalties for providing false certifications, including contract termination; and three-year ineligibility to bid on contracts under 62 Pa. C.S. § 531 (Debarment or suspension).

### CERTIFICATION

I, the official named below, certify I am duly authorized to execute this certification on behalf of the contractor/grantee identified below, and certify that the contractor/grantee identified below is compliant with applicable Pennsylvania state labor and workplace safety laws, including, but not limited to, those listed in Paragraph A, above. I understand that I must report any change in the contractor/grantee's compliance status to the Purchasing Agency immediately. I further confirm and understand that this Certification is subject to the provisions and penalties of 18 Pa. C.S. § 4904 (Unsworn falsification to authorities).

<b>Signature</b>	<b>Date</b>
<b>Name (Printed)</b>	
<b>Title of Certifying Official (Printed)</b>	
<b>Contractor/Grantee Name (Printed)</b>	