

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)
 MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

BID TABULATION SHEET

Project Funding: State Lead Federal Lead Healthy Homes DHHS **Project Type:** Single-Family Multi-Family

Agency (CAA): _____

CAA Rep Name: _____
 CAA Rep Title: _____
 CAA Rep Phone: _____
 CAA Rep Email: _____

Applicant: _____	Co-Applicant: _____
Property: _____	

BID 1	
Contractor Name	<input type="checkbox"/> Not on Debarment List
Date Bid Submitted	<input type="checkbox"/> Current Insurance Certificates
Bid Amount \$	<input type="checkbox"/> Available / Can meet project timeline
Comments:	

BID 2	
Contractor Name	<input type="checkbox"/> Not on Debarment List
Date Bid Submitted	<input type="checkbox"/> Current Insurance Certificates
Bid Amount \$	<input type="checkbox"/> Available / Can meet project timeline
Comments:	

BID 3	
Contractor Name	<input type="checkbox"/> Not on Debarment List
Date Bid Submitted	<input type="checkbox"/> Current Insurance Certificates
Bid Amount \$	<input type="checkbox"/> Available / Can meet project timeline
Comments:	

AWARDED TO: _____
Comments: _____

 CAA Representative Signature

 Date

 CAA Representative Name