|  |  |
| --- | --- |
| **To: The Principal** | **District / Region** |
| Type here | Type here |
| **To be completed by the Offeror** |
| **I / We (Name of Offeror)** |
| Name of OfferorType here | ACN or ABN (if applicable)Type here |
| of |
| Street AddressType here | Postal AddressType here |
| **offer to construct the Works as described in the Offer Documents:*** for the Schedule of Rates;
* on or before the Date for Practical Completion;
* in accordance with the requirements as set out in the Offer Documents.
 |
| **Amount in Words** | **Amount in figures** |
| Type here | $ Type here |
| **The following details are provided as part of our Offer** |
| **Insurance** |
| **Worker's cover** |
| Policy NumberType here | Expiry dateType here |
| **Public liability** |  | **Insured amount** |
| Insurer / Policy NumberType here | Expiry dateType here | $ Type here |
| **Insurance of the Works (if option exercised)** |  | **Insured amount** |
| Insurer / Policy NumberType here | Expiry dateType here | $ Type here |
| **Health and Safety Officer** |
| NameType here | Telephone numberType here |
| **Contractor’s Representative** |
| NameType here | Telephone numberType here | EmailType here |
| **Proposed Working Days and Hours** |
| Days | Hours |
| Monday to Friday | Type here | Refer to Annexure A, Item 33. |
| Saturday | Type here |
| Sunday | Type here |
| Public holidays | Type here |
| **Authorisation** |
| NameType here | PositionType here |
| Signature | DateType here |

The Department of Transport and Main Roads collects Personal Information on this Form so that you may authorise the Tender for and on behalf of the Tenderer. The information on this Form is accessible by authorised departmental officers and external personnel who are engaged to assess Tenders and if your Offer is accepted, the department may from time to time disclose your contact details to third parties as a point of contact.