



DBL Surety, LLC

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BID BOND REQUEST FORM

To: _____

Today's Date: ____ / ____ / ____

From: _____

Contractor: _____

Obligee (Bond Payable To): _____

Address: _____

Legal Project Name (including any identifying numbers): _____

Job Location: _____

Scope of Work: _____

Bid Date and Time: ____ / ____ / ____ am/pm

Estimated Bid: \$ _____

Bid Bond Amount: ____ % or \$ _____

Bid Opening Location: _____

Estimated Start Date: _____

Completion Time: _____

Penalties/Damages: _____

Special Bid Bond Form? Yes (attach form) No

Retainage: _____ %

Warranty Period: _____

Covered By Manufacturer? Yes No

Contractor's Guarantee Period(s): _____

Work On Hand As Of: ____ / ____ / ____ \$

List Major Subcontractors

Amount

Sub Bond

\$ _____ Yes No

\$ _____ Yes No

\$ _____ Yes No

\$ _____ Yes No

Architect/Engineer: _____ Phone Number: _____

Special Hazards: _____

Comments and/or Additional Notes: _____

RESULTS

Low Bidder: _____ Bid Amount: \$ _____

2nd Bidder: _____ Bid Amount: \$ _____

3rd Bidder: _____ Bid Amount: \$ _____

Do you expect to be awarded the contract? Yes No

Comments: _____

RETURN COMPLETED FORM TO

INFO@DBLSURETY.COM