

**IFB REGISTRATION FORM**

<b>IFB PMB-2015-19</b>	<b>FURNISH REFUSE COLLECTION SERVICES AT KAHALE MUA – STATE AND KAHALE MUA - FEDERAL ON THE ISLAND OF MOLOKAI</b>
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INSTRUCTIONS

Please fill out this sheet and leave original at the respective office where you picked up your bid packet. A copy will be made for you. Take the copy with you as it contains important dates, times and information.

Read this packet carefully. If you have any questions, please call Kathy Mitchell, IFB Coordinator at (808) 832-1892.

<b>Pre-Bid Conference/Site Visitation:</b>	<u>Tuesday, July 14, 2015 9:00 a.m. Hawaii Standard Time (HST)</u> at the HPHA Building A Conference Room #1, 1002 North School Street, Honolulu, Hawaii 96817. Please call the respective Officer-In-Charge to set up a visitation date.
<b>Bid Offer Form Due Date:</b>	Due before <u>10:00 a.m. HST on Tuesday, July 21, 2015</u> at the HPHA, Central Files Office, 1002 North School Street, Building D, Honolulu, HI 96817.
<b>Bid Opening:</b>	<b>Tuesday July 21, 2015</b> At 10:15 a.m. at the HPHA, Contract and Procurement Office, 1002 N. School Street, Building D, Honolulu, Hawaii 96817.
Date: _____	
<b>Company:</b>	_____
<b>Address:</b>	_____
<b>Phone #:</b>	_____
<b>Cell #:</b>	_____
<b>Fax #:</b>	_____
<b>Contact Person:</b>	_____

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*Signature of Person Picking Up Packet*

**REQUIRED CERTIFICATIONS:**

The following shall be submitted with the Bid Offer Form:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Hawaii Compliance Express, Certificate | <input checked="" type="checkbox"/> Corporate Resolution |
| <input checked="" type="checkbox"/> Wage Certificate                       |  |

The following shall be submitted prior to start of contract:

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|--|---|
| <input checked="" type="checkbox"/> Policies of Required Insurance | <input checked="" type="checkbox"/> Valid Tax Clearance Certificate |
| <input type="checkbox"/> Other: _____                              |   |