

MANDATORY Pre-Bid Meeting

NESHAMINY CREEK SUPPLEMENTAL WORK PLAN NO. 5 – GROUP 15

Spec #48-09/12

September 7, 2012 1:00 PM

NOTICE: Sending information about this bid by email or facsimile is an accommodation and the County of Bucks is not liable for any errors in transmission of the documents. Obtaining all bid documents including Addendums is the responsibility of the Bidder.

1. **YOU MUST PRINT CLEARLY!**

Premier Builders Inc. Phone: 215-295-4640
Company Name
1015 Big Oak Rd. Fax: 215-295-8512
Street Address Unit /Suite #
Yardley PA 19067 Email: ESC1015@aol.com
City State Zip
I have read and understand the the Notice above:
Signature: Justin Escher Printed Name and Title Justin Escher PM

2. **YOU MUST PRINT CLEARLY!**

TILMAR DESIGN Phone: 215-339-8453
Company Name
1708 Fax: APERVIL@VERSION.NET
Street Address Unit /Suite #
PHILA PA 19145 Email:
City State Zip
I have read and understand the the Notice above:
Signature: Anthony Sulizio Printed Name and Title Anthony Sulizio

3. **YOU MUST PRINT CLEARLY!**

SAKOUTS BUILDERS & LAND DEV. Phone: 732-890-2145
Company Name
1007 W. COMEBARE BLVD. Fax: 732-988-1120
Street Address Unit /Suite #
JACKSON NJ 08527 Email: SAKOUTSBUILDERS@YAHOO.COM
City State Zip
I have read and understand the the Notice above:
Signature: William Sakouts Printed Name and Title William SAKOUTS P.M.

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4. **YOU MUST PRINT CLEARLY!**

Company Name: BASS II ENT Phone: ²⁶⁷318-8456

Street Address: 2760 OLD FARM DR Unit /Suite #: _____ Fax: _____

City: VINELAND NJ State: NJ Zip: 08361 Email: BASS2ENT@VERIZON.NET

I have read and understand the the Notice above:

Signature: [Signature] Printed Name and Title: SAM SMITH V.P.

5. **YOU MUST PRINT CLEARLY!**

Company Name: CARPENTRY USA Phone: 215-340-0365

Street Address: Po Box 838 Unit /Suite #: _____ Fax: 215-340-0365

City: Doylestown PA State: PA Zip: 18901 Email: CARPENTRYUSA@Gmail.COM

I have read and understand the the Notice above:

Signature: [Signature] Printed Name and Title: TOBY PERFETTO / OWNER

6. **YOU MUST PRINT CLEARLY!**

Company Name: Shymor Construction Inc. Phone: 215-285-8722

Street Address: 4036 Jefferies Dr Unit /Suite #: _____ Fax: 215-402-0366

City: Lafayette Hill PA State: PA Zip: 19444 Email: PPNRC@ACh.com

I have read and understand the the Notice above:

Signature: [Signature] Printed Name and Title: owner

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<u>Buildingcraft Ass'ts inc.</u>	Phone: <u>215-357-4383</u>		
Company Name			
<u>140 Chestnut DR 1VE</u>	Fax: <u>215-357-9125</u>		
Street Address	Unit /Suite #		
<u>Richboro PA 18954</u>	Email: <u>Buildingcraft@ComCast.net</u>		
City	State	Zip	
I have read and understand the the Notice above:			
Signature: <u>J. Shadzic</u>	Printed Name and Title <u>FAZ SHANZIK PRESIDENT</u>		

8.

YOU MUST PRINT CLEARLY!

<u>THE SIMMONS GROUP LLC</u>	Phone: <u>215.778.9666</u>		
Company Name			
<u>3720 SPRUCE ST ST.448</u>	Fax: <u>610.449.4364</u>		
Street Address	Unit /Suite #		
<u>PHILA PA 19104</u>	Email: <u>SIMMONSGROUP@MYGOODWORK.COM</u>		
City	State	Zip	
I have read and understand the the Notice above:			
Signature: <u>Eric Simmons</u>	Printed Name and Title <u>ERIC SIMMONS FOREMAN</u>		

9.

YOU MUST PRINT CLEARLY!

<u>J L Ramos & Assoc. INC.</u>	Phone: <u>215 270 3778</u>		
Company Name			
<u>1564 Beck Hill DR</u>	Fax: <u>215 938 1297</u>		
Street Address	Unit /Suite #		
<u>H.V. PA 19006</u>	Email: <u>jlramos@msk.com</u>		
City	State	Zip	
I have read and understand the the Notice above:			
Signature: <u>[Signature]</u>	Printed Name and Title <u>J L RAMOS, PPEB.</u>		

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10. **YOU MUST PRINT CLEARLY!**

Company Name KOLB HEATING + COOLING Phone: 267-784-1286

Street Address 3959 WELSH RD. Unit /Suite # 104 Fax: 609-601-8098

City Willow Grove State PA Zip 19090 Email: DENKOLB@GMAIL.COM

I have read and understand the the Notice above:

Signature: D. Kolb Printed Name and Title DENNIS KOLB - OWNER

11. **YOU MUST PRINT CLEARLY!**

Company Name TODD KNEE BUILDING Phone: 267-718-3031

Street Address GEORGE RD Unit /Suite # _____ Fax: _____

City HTG Valley State PA Zip _____ Email: TODDK111@MSN.COM

I have read and understand the the Notice above:

Signature: Todd Knee Printed Name and Title TODD KNEE - Pres

12. **YOU MUST PRINT CLEARLY!**

Company Name Wolfe House Movers Phone: 610-488-1020

Street Address _____ Unit /Suite # _____ Fax: 610-488 8011

City _____ State _____ Zip _____ Email: Mike@wolfehousemovers.com

I have read and understand the the Notice above:

Signature: Mike Printed Name and Title Mike Brovont estimator

