

**BID FORM TO
PURCHASE SURPLUS PROPERTY**

Bid submitted by Name: _____
 Address: _____
 City, State & Zip Code _____
 Phone Number: _____
 Email address: _____

Item Description	Bid Amount
No. 1 – Portable Office Trailer	\$
No. 2 – Wheelchair Ramp & Walkway	\$
No. 3 – Medical Bed	\$

A Bid Amount must be listed on each item bidder wants to purchase. Bidder may bid on one, two or three items. Bids will be awarded to the highest and best bidder for each individual item.

The bidder hereby agrees to remove ALL ITEMS PURCHASED, from the premises, no later than 10 a.m. on December 4, 2024.

Bidder Signature

Date

The City of Grove reserves the right to reject any and all bids received.