

# SHEA SURETY INSURANCE SERVICES

## BID BOND ORDER FORM

Principal \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Contact \_\_\_\_\_  
\_\_\_\_\_ Phone \_\_\_\_\_

\*Maximum Bid Amount \$ \_\_\_\_\_

\*Bid Date/Time \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Invitation No. \_\_\_\_\_

\*Percent bid bond required \_\_\_\_\_% \*Special Bid Bond form required? **Y**\_\_ **N**\_\_  
(If yes, **please provide copy**)

\*Obligee:  
(who requires  
the bond) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Description  
of work to be  
performed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ \*(Please submit copies of "Notice to Bidders" or "Instructions to bidders" forms.)

\*Project Start Date \_\_\_\_\_ \*Completion time allowed \_\_\_\_\_ days

\*Maintenance / Warranty Period \_\_\_\_\_

\*Penalty (liquidated damages) \$ \_\_\_\_\_

Payments: Monthly progress billings? **Y**\_\_ **N**\_\_ Other \_\_\_\_\_

Retention \$ \_\_\_\_\_ or % \_\_\_\_\_

Estimated Gross Profit \$ \_\_\_\_\_ or % \_\_\_\_\_

### Job Breakdown

Labor Cost \$ \_\_\_\_\_ % \_\_\_\_\_  
Mat'l/Equip. Cost \$ \_\_\_\_\_ % \_\_\_\_\_  
Sub Cost \$ \_\_\_\_\_ % \_\_\_\_\_

**(Please list the three most critical subcontracts along with their cost estimates.)**

Overhead/Profit \$ \_\_\_\_\_ % \_\_\_\_\_

Current work on Hand (Backlog) \$ \_\_\_\_\_  
(Estimated costs to complete all jobs in progress and under contract)

Please contact Jim Shea at 408-626-6112 or Dianna Guzman at 408-626-6109 with questions.