

# CONTRACTOR'S PROPOSAL FORM

## A. General Information

Date of Proposal: \_\_\_\_\_

Address of Unit: Street \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Family: \_\_\_\_\_

Current Address of Family: Street: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Current Telephone Number of Family ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

## B. How to Fill Out This Proposal

1. Carefully review the Housing Quality Standards Inspection Form provided to you by the \_\_\_\_\_ Rehabilitation Program. If any portion is unclear, please contact the Program as soon as possible.
2. Fully detail the work to be performed in the "Work Specification" column of the Contractor's Proposal Form. The work specification must be consistent with the Program's General Rehabilitation Specifications and/or local codes as appropriate.
3. A bid price must be provided in the indicated column for each work item requested. The total cost for the work must be provided as indicated.
4. Please refer to the Contractor Instructions for details regarding other submittal requirements.

## 1. LIVING ROOM

Item #	Description	Work Specification	Bid Price
1.1	LIVING ROOM		
1.2	ELECTRICITY		
1.3	ELECTRICAL HAZARDS		
1.4	SECURITY		
1.5	WINDOW CONDITION		
1.6	CEILING CONDITION		
1.7	WALL CONDITION		
1.8	FLOOR CONDITION		
1.9	LEAD PAINT		
1.10	WEATHERSTRIPPING		
1.11	OTHER		
1.12	OTHER		

Notes: (Give Item #)

## 2. KITCHEN

Item #	Description	Work Specification	Bid Price
2.1	KITCHEN AREA		
2.2	ELECTRICITY		
2.3	ELECTRICAL HAZARDS		
2.4	SECURITY		
2.5	WINDOW CONDITION		
2.6	CEILING CONDITION		
2.7	WALL CONDITION		
2.8	FLOOR CONDITION		
2.9	LEAD PAINT		
2.10	STOVE OR RANGE WITH OVEN		
2.11	REFRIGERATOR		
2.12	SINK		
2.13	SPACE FOR STORAGE AND PREPARATION OF FOOD		

Item #	Description	Work Specification	Bid Price
2.14	WEATHERSTRIPPING		
2.15	OTHER		
2.16	OTHER		

Notes: (Give Item #)

### 3. BATHROOM

Item #	Description	Work Specification	Bid Price
3.1	BATHROOM		
3.2	ELECTRICITY		
3.3	ELECTRICAL HAZARDS		
3.4	SECURITY		
3.5	WINDOW CONDITION		
3.6	CEILING CONDITION		
3.7	WALL CONDITION		
3.8	FLOOR CONDITION		
3.9	LEAD PAINT		
3.10	FLUSH FOILET IN ENCLOSED ROOM IN UNIT		
3.11	FIXED WASH BASIN OR LAVABORY IN UNIT		
3.12	TUB OR SHOWER IN UNIT		
3.13	VENTILATION		

Item #	Description	Work Specification	Bid Price
3.14	WEATHERSTRIPPING		
3.15	OTHER		
3.16	OTHER		

NOTES: (Give Item #)

**4. OTHER ROOMS USED FOR LIVING AND HALLS (Complete for each room)**

Item #	Description	Work Specification	Bid Price
4.1	<b>ROOM LOCATION</b> right/left _____ front/rear _____ floor level _____	<b>ROOM CODES (Circle one)</b> 1 = Bedroom or any other room used for sleeping (regardless of type of room) 2 = Dining Room or Dining Area 3 = Second Living Room, Family Room, Den, Playroom, TV Room 4 = Entrance Halls, Corridors, Halls, Staircases 5 = Additional Bathroom 6 = Other	
4.2	ELECTRICITY		
4.3	ELECTRICAL HAZARDS		
4.4	SECURITY		
4.5	WINDOW CONDITION		
4.6	CEILING CONDITION		
4.7	WALL CONDITION		
4.8	FLOOR CONDITION		
4.9	LEAD PAINT		
4.10	WEATHERSTRIPPING		
4.11	OTHER		
4.12	OTHER		

NOTES: (Give Item #)

5. ALL SECONDARY ROOMS NOT USED FOR LIVING

Item #	Description	Work Specification	Bid Price
5.1	NONE GO TO PART 6		
5.2	SECURITY		
5.3	ELECTRICAL HAZARDS		
5.4	OTHER POTENTIALLY HAZARDOUS FEATURES IN ANY OF THESE ROOMS		
5.5	OTHER		
5.6	OTHER		

NOTES: (Give Item #)



**6. BUILDING EXTERIOR**

Item #	Description	Work Specification	Bid Price
6.1	FOUNDATION CONDITION		
6.2	STAIRS, RAILS, AND PORCHES CONDITION		
6.3	ROOF AND GUTTERS CONDITION		
6.4	EXTERIOR SURFACES CONDITION		
6.5	CHIMNEY CONDITION		
6.6	LEAD PAINT: EXTERIOR SURFACES		
6.7	MOBILE HOMES: TIE DOWNS		
6.8	MOBILE HOMES: SMOKE DETECTORS		
6.9	CAULKING		
6.10	OTHER		
6.11	OTHER		

NOTES: (Give Item #)

**7. HEATING, PLUMBING, AND INSULATION**

Item #	Description	Work Specification	Bid Price
7.1	ADEQUACY OF HEATING EQUIPMENT		
7.2	SAFETY OF HEATING EQUIPMENT		
7.3	VENTILATION AND ADEQUACY OF COOLING		
7.4	HOT WATER HEATER		
7.5	WATER SUPPLY		
7.6	PLUMBING		
7.7	SEWER CONNECTION		
7.8	INSULATION		
7.9	OTHER		
7.10	OTHER		

NOTES: (Give Item #)

## 8. GENERAL HEALTH AND SAFETY

Item #	Description	Work Specification	Bid Price
8.1	ACCESS TO UNIT		
8.2	EXITS		
8.3	EVIDENCE OF INFESTATION		
8.4	GARBAGE AND DEBRIS		
8.5	REFUSE DISPOSAL		
8.6	INTERIOR STAIRS AND COMMON HALLS		
8.7	OTHER INTERIOR HAZARDS		
8.8	ELEVATORS		
8.9	INTERIOR AIR QUALITY		
8.10	SITE AND NEIGHBORHOOD CONDITIONS		
8.11	LEAD PAINT: OWNER CERTIFICATION		

Item #	Description	Work Specification	Bid Price
8.12	OTHER		
8.13	OTHER		

NOTES: (Give Item #)