

**ADVERTISEMENT FOR BIDS
PROPOSAL P-2022 - 05
CITY OF SALEM
CHEMICALS**

The City of Salem, Illinois will accept sealed bids marked "Proposal for Chemicals" until 11:00 a.m. on Monday, February 28, 2022 at the Salem City Hall, at which time they will be publicly opened. Specifications are available at the office of the City Clerk, 101 South Broadway, Salem, Illinois 62881.

Rex Barbee
City Manager

**SPECIFICATIONS FOR CHEMICALS
PROPOSAL P-2022- 05
CITY OF SALEM, ILLINOIS**

BID FORM

The undersigned hereby agrees to furnish the City of Salem with chemicals in full compliance with the Specifications for the following prices:

(1) **ITEM**

UNIT PRICE

Soda Ash (on 40" pal.) \$ _____ 50# bag

Chlorine \$ _____ ton

- (2) Prices include fuel and freight delivery charges to Salem, Illinois.
Prices are firm and no surcharges or additions to unit price will be paid for the duration of the guarantee period.

(3) Prices guaranteed until _____

(4) Name of Company _____

Address _____

(5) Signature of Authorized Representative _____

Title _____

Date _____

Phone # _____

**SPECIFICATIONS FOR CHEMICALS
CITY OF SALEM, ILLINOIS**

02-08-22

****QUOTE FORM ONLY****
(Not to be considered a Bid)

The undersigned hereby agrees to furnish the City of Salem with chemicals, to be delivered as requested, through April 30, 2023, for the prices as follows; *and will notify the City of any price changes before delivery:*

(1) <u>ITEM</u>	<u>UNIT PRICE</u>
Hydrofluosilicic Acid (ret. Drum)	\$ _____ 55 gal. drum
Potassium Permanganate (tech grade)	\$ _____ 55.125# drum
Ammonium Sulfate(AWWA Standard B-302 and shall be NSF approved	\$ _____ 50 lb bags
Hydrochloric Acid	\$ _____ Bulk
Powdered Carbon	\$ _____ 40#-50# bag

(2) Prices include fuel and freight delivery charges to Salem, Illinois.
Prices are firm and no surcharges or additions to unit price will be paid for the duration of the guarantee period.

(3) Prices guaranteed until _____

(4) Deposit amount per chlorine cylinder \$ _____

(5) Deposit amount per drum Hydrofluosilicic Acid \$ _____

(6) Name of Company _____

Address _____

(7) Signature of Authorized Representative _____

Title _____

Date _____

Phone # _____