

# MASONRY BID-PROPOSAL

This form complies with professional standards currently in effect

**ABCForms, Inc.**

License B 0000001  
65 Pine Avenue Suite 310  
Long Beach, CA 90802

DATE: \_\_\_\_\_

PROPOSAL NO: \_\_\_\_\_

*Insert your logo here*

**PHONE (800) 555-5151 CELL (800) 555-5151**

<i>and</i> <b>BUYER/ OWNER</b>	NAME		
	PROJECT ADDRESS		STATE/ZIP PHONE
	ALTERNATE ADDRESS (IF ANY)		STATE/ZIP PHONE

Masonry Work To Begin: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Date Of Plans: \_\_\_\_\_ Architect: \_\_\_\_\_ Engineer: \_\_\_\_\_

Work performed at \_\_\_\_\_

We hereby propose to furnish the following work: \_\_\_\_\_  
(Description If Known)

**PROPOSED PAYMENT:** Owner agrees to pay Contractor \_\_\_\_\_ The payment schedule will be: (1) Down payment of \$\_\_\_\_\_, (2) Payment schedule as follows: \_\_\_\_\_

**NOTE:** This proposal may be withdrawn by Contractor \_\_\_\_\_ days.

**ACCEPTANCE:** You are hereby authorized to return a formal contract for the work described in the above proposal, for which the undersigned agrees to pay the amount stated in the terms thereof.

CONTRACTOR SIGNATURE	BUYER SIGNATURE	DATE