

FORM 4D1
BID/CONTRACT APPROVAL
 (Professional Services)

Subrecipient: _____

Project Number: _____ Project Title: _____

Contract Award Amount: _____ Project Award Amount: _____

Bid Opening Date: _____ Authorization to Incur Grant Costs Date: _____

REQUIREMENT	COMPLETED (X)
Made affirmative efforts to obtain a bid or bids from minority contractors. Department of Building and Zoning - Registered Contractors Search	
Copy of Affidavit of Publication, RFP, or other proof of contact (Attached)	
Copy of the three lowest bids (Attached)	

#1 LOWEST BIDDER:	Amount: \$
ADDRESS:	
Unique Entity ID:	
#2 BIDDER:	Amount: \$
ADDRESS:	
#3 BIDDER:	Amount: \$
ADDRESS:	

Place an (X) by the services to be administered by this servicer:

Accounting
 Administrative
 Architectural

Consultant
 Engineering
 Legal

Signed by: _____ Date: ____/____/20____

Title: _____

Debarment Verified as Active (Yes or No): _____ Date: ____/____/20____

Approved by Cook County: _____ Date: ____/____/20____