

FORM 4D1
BID/CONTRACT APPROVAL
 (Professional Services)

Subrecipient: _____

Project Number: _____ Project Title: _____

Date of Bid Opening: _____ Contract Amount: _____

Professional Service Budget Amount: _____

REQUIREMENT	COMPLETED (X)
Made affirmative efforts to obtain a bid or bids from minority contractors.	
Copy of Affidavit of Publication, RFP, or other proof of contact (Attached)	
Copy of the three lowest bids (Attached)	

LOW BIDDER:	Amount: \$
ADDRESS:	
#2 BIDDER:	Amount: \$
ADDRESS:	
#3 BIDDER:	Amount: \$
ADDRESS:	

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

_____ **Engineering**

_____ **Architectural**

_____ **Administration**

_____ **Legal Services**

Signed by: _____

Date: ____/____/20____

Title: _____

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

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