

**CITY OF ELKO, NEVADA
BIDDERS LIST**

(Information requested below must be typewritten or legibly written in ink)

Company Name: _____

Contact Name: _____

Mailing Address: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Nevada Contractors License(s) #: _____ Bond Amount(s): _____

Description of the work your license(s) include: _____

City of Elko Business License #: _____

(Bidder must be licensed within ten (10) business days (not including Saturdays, Sundays, and Legal Holidays) after receipt of Notice of Award.)

Any questions can be directed to: City of Elko; 1751 College Avenue; Elko, NV 89801 or by calling (775) 777-7210 or by faxing (775) 777-7219.

The information provided by the undersigned is true to the best of my knowledge:

Signature

Title

Date