



City/Town or Other Awarding Authority Prequalification Confirmation

Apparent 3 Lowest Bidders Form

Approved Funding Program(s):

Chapter 90 Program

Complete Streets Funding Program

Shared Streets and Spaces

Local Bottle Neck Reduction Program

Program Mass-Works Program

Utility Grants Program

Municipal Small Bridge Program

Municipal Paving Program

Municipality Funds

Other _____

City / Town or Other Awarding Authority: _____

Location: _____

Description: _____

Class of Work (*from the approved Prequalification Form*): _____

Bid Opening Date: _____ Project Value (*from the approved Prequalification Form*): \$ _____

LIST THE LOWEST BIDDER FIRST

Contractor	Address	City	State/Zip	Total Bid	Rank
					1
					2
					3

Signature of Person Completing Form: _____

Sign

Date

Print Name: _____

Comments:

MASSDOT PREQUALIFICATION PROGRAM OFFICE USE ONLY

Are all contractors on the official final bidders list? Yes No Reviewed by: _____

If no, does the contractor have an approved Waiver? Yes No Verified By: _____

Comments:

To complete and submit Interim and Final Contractor/Subcontractor Evaluation Reports, click here: [website](#).