

WILLIAMSON COUNTY BID FORM

ORIGINAL

BYERS' HOUSE REPAIRS

BID NUMBER: 09WC718

NAME OF BIDDER: _____ PIATRA INC. _____

Mailing Address: _____ P.O. BOX 9593 _____

City: _____ AUSTIN _____ State: _____ TX _____ Zip: _____ 78766 _____

Email Address: _____ MGLASS@PIATRAINCOM _____

Telephone: (_512_) _299.0404 _____ Fax: (_512_) _371.7476 _____

Mobile Phone: (_512_) _299.0404 _____

Total Job Price: _____ \$ 8,874.00 _____

Number of Days for Completion: _____ 15 DAYS _____

The undersigned, by his/her signature, represents that he/she is authorized to bind the bidder to fully comply with the terms and conditions of the attached Invitation for Bid, Specifications, and any Special Provisions for the amount(s) shown on the accompanying bid sheet(s). By signing below, you have read the entire document and agreed to the terms therein.

 _____ Date of BID: _____ 6/17/09 _____
Signature of Person Authorized to Sign BID

Printed Name and Title of Signer: _____ MIRELA IVAN GLASS / PRESIDENT _____

DO NOT SIGN OR SUBMIT WITHOUT READING ENTIRE DOCUMENT

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH BID



WILLIAMSON COUNTY CONFLICT OF INTEREST STATEMENT

I hereby acknowledge that I am aware of the Local Government Code of the State of Texas, Section 176.006 regarding conflicts of interest and will abide by all provisions as required by Texas law.

Printed name of person submitting form:

MIRELA IVAN GLASS

Name of Company:

PIATRA INC.

Date:

6/17/2009

Signature of person submitting form:

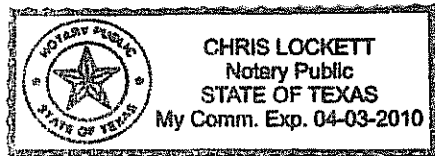
Mirela Ivan Glass

Notarized:

Sworn and subscribed before me

by: Mirela Ivan Glass

on 6/16/09
(date)



PIATRA INC.

Concrete, Masonry and Fencing Professionals

CLIENT REFERENCES

- | | | |
|-----------------------|------------------------------------|---------------------------|
| 1. Company's Name | Austin Housing Finance Corporation | |
| Name of Contact | Marianne Ouren / Arlie Williams | |
| Title of Contact | Project Manager | |
| Present Address | 1000 East 11 th St | |
| City, State, Zip Code | Austin, TX 78702 | |
| Telephone Number | (512) 974.3189 | Fax Number (512) 974.3152 |

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|-----------------------|---|-----------------------------|
| 2. Company's Name | Capital Metropolitan Transportation Authority | |
| Name of Contact | Mr. Pete Solis | |
| Title of Contact | Building Maintenance Supervisor | |
| Present Address | 2910 East 5th Street | |
| City, State, Zip Code | Austin, Texas 78702 | |
| Telephone Number | (512) 791.5305 | Fax Number (512) 360.6065 |

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|-----------------------|-------------------|---------------------------|
| 3. Company's Name | Roscoe Management | |
| Name of Contact | Derek Woods | |
| Title of Contact | Project Manager | |
| Present Address | 602 W 7th St # C | |
| City, State, Zip Code | Austin, TX 78701 | |
| Telephone Number | (512) 480.9886 | Fax Number (512) 480.9886 |

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|-----------------------|---------------------------------------|---------------------------|
| 4. Company's Name | Alliance Association Management, Inc. | |
| Name of Contact | Sophia Lyons | |
| Title of Contact | Community Manager | |
| Present Address | 115 Wild Basin, Suite 308 | |
| City, State, Zip Code | Austin, TX 78746 | |
| Telephone Number | (512) 347.2871 | Fax Number (512) 328.6178 |

PIATRA INC.

P.O. BOX 9593 • AUSTIN • TX • 78766

TEL: 512.299.0404 • FAX: 512.371.7476 • info@piatrainc.com