



**FORM 6A: CMD LBE TRUCKING FORM**

This form is to be completed by apparent low bidder to describe the complete scope of trucking work to be performed for the contract and submitted to the CMD by 5 p.m. on the fifth day following Bid opening.

Contract Number: \_\_\_\_\_ Contract Name: \_\_\_\_\_

**SECTION 1. TRUCKING ESTIMATE**

Products to be Hauled:		
Type of equipment needed/indicate maximum Number of trucks needed per day:		
Quantity of product to be hauled:		
Estimated quantity per truckload:		
Estimated number of truckloads:		
Products to be hauled from (give point of origin):		
Estimated Number of truck hours per trip:		
Trucking Rate:		
Estimate of total trucking (Number of loads times hours per trip times trucking hourly rate):		

If an assigned Trucker is being paid for Administrative Work (i.e. Dispatcher), Describe and State Amount to be Paid:

Is this assigned Trucking firm an LBE or Non-LBE firm, specify:

☐ LBE ☐ Non-LBE

Total Dollar Amount Committed to LBE Truckers: \$ \_\_\_\_\_

\* Disposal fee and equipment rental fee will not be counted towards meeting the LBE trucking dollars amount.

**SECTION 2. TRUCKING AND HAULING FIRMS**

List below CMD certified LBE trucking and hauling firms that will be utilized on this project. *Photocopy this form for additional truckers and provide the requested information for each LBE trucker.*

Firm Name:	<input type="checkbox"/> LBE <input type="checkbox"/> Non-LBE
Products to be hauled:	
Number of Trucks Needed:	
Type of Trucks Needed:	
Proposed Dollar Amount of subcontract:	



Firm Name:	<input type="checkbox"/> LBE <input type="checkbox"/> Non-LBE
Products to be hauled:	
Number of Trucks Needed:	
Type of Trucks Needed:	
Proposed Dollar Amount of subcontract:	

Firm Name:	<input type="checkbox"/> LBE <input type="checkbox"/> Non-LBE
Products to be hauled:	
Number of Trucks Needed:	
Type of Trucks Needed:	
Proposed Dollar Amount of subcontract:	

Firm Name:	<input type="checkbox"/> LBE <input type="checkbox"/> Non-LBE
Products to be hauled:	
Number of Trucks Needed:	
Type of Trucks Needed:	
Proposed Dollar Amount of subcontract:	

Firm Name:	<input type="checkbox"/> LBE <input type="checkbox"/> Non-LBE
Products to be hauled:	
Number of Trucks Needed:	
Type of Trucks Needed:	
Proposed Dollar Amount of subcontract:	

I declare, under penalty of perjury that I am the owner or authorized representative of this firm and that the foregoing is true and correct.

\_\_\_\_\_  
Owner/Authorized Representative (Signature)

\_\_\_\_\_  
Name and Title (Print)

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Telephone Date