

## RURAL HOSPITAL CAPITAL IMPROVEMENT GRANT RFP

### Competitive Bidding Form

Minnesota Statutes, Section 144.148 requires applicants to submit evidence that competitive bidding was used to select contractors for the proposed project. Please provide information requested, check appropriate boxes and attach documentation as indicated.

**Applicant Hospital:**

**Project Name:**

Competitive bidding has been completed for the proposed project through one of the following methods:

- This hospital is owned by a local unit of government subject to the Uniform Municipal Contracting Law, M.S. section 471.345, and has complied with those requirements. (Attach documentation of the bid and award process.)
- This hospital is not subject to the Uniform Municipal Contracting Law, but has its own procurement policy that requires competitive bidding. (Attach relevant sections of the policy and documentation of the bid and award process.)
- This hospital is not subject to the Uniform Municipal Contracting Law, does not have its own procurement policy that requires competitive bidding, but has followed a competitive bidding process. (Attach relevant sections of the policy and documentation of award process.)

Competitive bidding has not yet been completed for the proposed project, but will be conducted through one of the following methods. (You will be required to submit documentation of the bid and award process before any State payment will be made.)

- This hospital is owned by a local unit of government subject to the Uniform Municipal Contracting Law, M.S. section 471.345, and will comply with those requirements.
- This hospital is not subject to the Uniform Municipal Contracting Law, but has its own procurement policy that requires competitive bidding. (Attach relevant sections.)
- This hospital is not subject to the Uniform Municipal Contracting Law, does not have its own procurement policy that requires competitive bidding, but will follow a competitive bidding process for this project. (Attach description.)

**Certification**

*I certify that the information contained herein is true and accurate to the best of my knowledge.*

**Name and Title:**

**Signature and Date:** \_\_\_\_\_