



Gene Lilly Surety Bonds  
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### BID BOND REQUEST FORM

<b>CONTRACTOR INFORMATION</b>			
_____		_____	
CONTRACTOR		DATE REQUESTED	
_____		_____	
ADDRESS		WILL PICK UP	
_____		_____	
CITY	STATE	ZIP CODE	REQUESTED BY
<b>BID BOND INFORMATION</b>			
_____		_____	
OBLIGEE (TO WHOM BOND IS PAYABLE)		BID DATE	
_____		_____	
ADDRESS		START DATE	
_____		_____	
CITY	STATE	ZIP CODE	COMPLETION DATE
_____			
PROJECT TITLE			
_____			
_____		% SUBBED	_____ %
PENALTY/LIQUIDATED DAMAGES		RETAINAGE:	_____ %
_____		_____	
PROJECT OR FEDERAL SOLICITATION # (IF APPLICABLE)		MAINTENANCE PERIOD	
_____		_____	
ESTIMATED PROJECT AMOUNT		AMOUNT OF BID BOND \$ OR %	
_____		_____	
CURRENT BACKLOG			
_____			
ANY SPECIAL INSTRUCTIONS			
_____			
_____			