



July 30, 2019

REQUEST FOR QUOTES – CP 19:HS

To Whom It May Concern:

Lyon County will be accepting quotes for 2019 Highway Latex Striping until 2:00 p.m. on August 2nd, 2019. Quotes to be received at the Lyon County Public Works Building, 504 Fairgrounds Road, Marshall, MN 56258 or **by emailing your quote to chadmagnussen@co.lyon.mn.us**

The 2018 edition of the Minnesota Department of Transportation “Standard Specification for Construction” shall govern except as modified below:

The provisions on MnDot Specification 1903 shall not apply.

The provisions of 2582.3 F.1 – Striper Computerized Data Logging System for Liquid Markings, shall be deleted.

The county board reserves the right to reject all quotes.

Starting date: Wednesday, August 7th, 2019.

Completion Date: Saturday, September 7th, 2019.

If you have questions, please contact our office at 507-532-8204 or 507-532-8205.

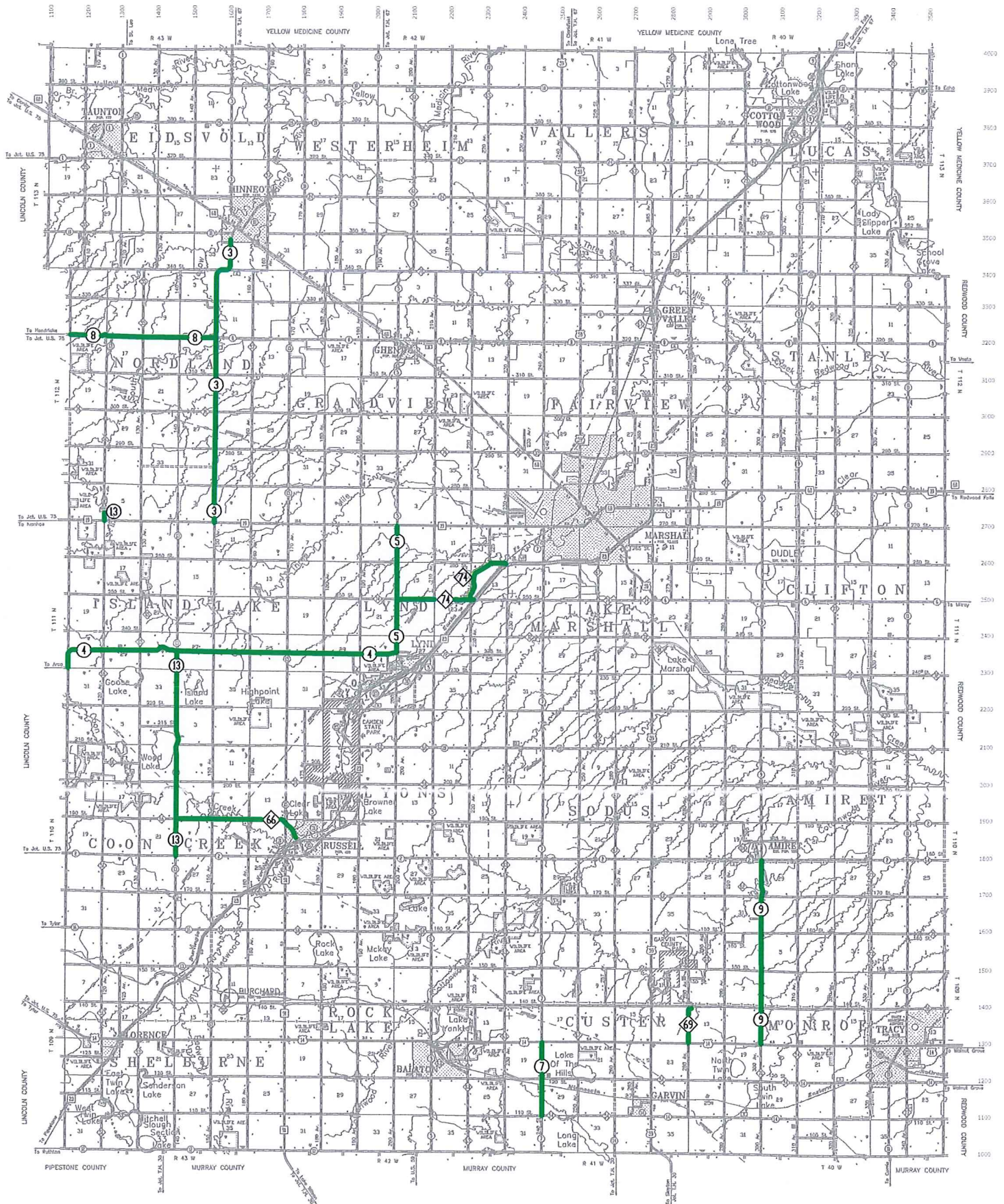
Sincerely,

A handwritten signature in blue ink, appearing to read "Chad Magnussen", with a long horizontal flourish extending to the right.

Chad Magnussen
Lyon County Public Works

Lyon County Striping (2019)

Latex Paint Area



2019 Lyon County Latex Striping

Road	6" White (latex)	4" Yellow (Latex)
C.S.A.H. 3	82,700.00	31,100.00
C.S.A.H. 4	97,200.00	48,000.00
C.S.A.H. 5	38,160.00	17,100.00
C.S.A.H. 7	21,300.00	9,250.00
C.S.A.H. 8	44,200.00	13,950.00
C.S.A.H. 9	49,800.00	12,300.00
C.S.A.H 13	58,600.00	27,800.00
CO 66	32,300.00	32,300.00
CO 69	10,220.00	8,000.00
CO 74	22,300.00	14,000.00
CO 74 (River Road)	40,360.00	32,050.00
Total:	497,140.00	245,850.00

SCHEDULE OF PRICES
 LYON COUNTY PROJECT NUMBER – CP 19:HS

BIDDER MUST FILL IN UNIT PRICES IN NUMERALS; MAKE EXTENSION FOR EACH ITEM AND TOTAL FOR COMPLETE INFORMATION CONCERNING THESE ITEMS, SEE PLANS AND SPECIFICATIONS, INCLUDING SPECIAL PROVISIONS.

SPEC NO	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	AMOUNT
2582.503	4" SOLID LINE PAINT	LIN FT	245,850.00		
2582.503	6" SOLID LINE PAINT	LIN FT	497,140.00		

TOTAL					
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QUOTE SUBMITTED BY:

Company Name: _____

Authorized Representative (please print) _____

Authorized Signature _____

Address _____

Telephone and FAX numbers _____