

**BIDDER INFORMATION SHEET**  
**FOR ORAL BID AUCTION PARTICIPANTS – NOVEMBER 2020**

Please mail in this completed form along with your bid deposit to the Caltrans District Office  
prior to November 5<sup>th</sup>, 2020.

**BIDDER'S NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**CELL PHONE:** (    ) \_\_\_\_\_ - \_\_\_\_\_    **Email Address:** \_\_\_\_\_

**ARE YOU BIDDING ON BEHALF OF A BUSINESS:**    YES [  ] NO [  ]

**IF YES, NAME OF BUSINESS:** \_\_\_\_\_

**I HEREBY CERTIFY THE ABOVE INFORMATION IS CORRECT:**

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

**The above information must be provided in full and submitted prior to the beginning of the oral bid auction. Bids will not be accepted without this form.**

**PARCEL(S) # TO BE BID ON:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**BIDDER NUMBER:** \_\_\_\_\_ (to be completed by Caltrans once bid deposit is received)