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Rural Municipality of
PINEY

RM of Piney
 PO Box 48
 Vassar, Manitoba
 R0A 2J0

2025 BID HOURLY CONTRACTOR FORM

Company Name: _____ Contact: _____ Phone No.: _____
 Mailing Address: _____ Current Certificate of Insurance Attached: YES ___ NO ___
 _____ Workers Compensation Registration Letter Attached: YES ___ NO ___
 _____ Workers Compensation Registration No.: _____

Equipment Type	Make	Model	Year	H.P.	Serial No.	License No.	Attachments	Bid Rate \$/hr \$/day

Additional Info: _____

Signature of Owner: _____ Date: _____