



Dave O'Mara Contractor, Inc.  
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Phone: 812.346.4135

Fax: 812.346.6305

**DATE: January 27, 2016**

**TO: Subcontractors and Suppliers**

**RE: Elizabethtown Stormwater Improvements Project - Bartholomew County  
Wessler Project No. 163714.04.001**

**BID DATE: Wednesday, February 10, 2016**

Our firm has purchased plans to bid this contract as a prime contractor. We are inviting quotations from contractor/supplier firms that might be interested in working with us on this project.

**Work shall include the relocation and regrading of drainage ditches, installation of bank stabilization measures, installation of new road culverts and installation of new storm sewers. This project includes approx. 2,300 ft of ditch relocation and regrading, installation of approx. 350 ft of new storm sewers, removal and replacement of approx.. 350 ft of road culverts, construction engineering, erosion and sediment control, traffic control, seeding and restoration and all incidental work required for a complete installation. Prevailing wages apply.**

Plans will be added to our *ftp site* for your viewing and consideration. You can find a link to our *ftp site* by visiting our website, <http://daveomara.com>. From there, click on "projects", "all bidding projects", "2015 projects." If you need any assistance finding the plans, feel free to email me at [tamikah@daveomara.com](mailto:tamikah@daveomara.com).

Quotations should be submitted **on or before 5:00pm, Tuesday 9, 2016.**

Please email your quote to our estimating department: [tammym@daveomara.com](mailto:tammym@daveomara.com) OR you may fax your proposal to 812.346.6305.

If you require additional information, please contact our Estimating Department at 812.346.4135.

Please complete, sign, date and return by fax to 812.346.6305 or by email to [tamikah@davaomara.com](mailto:tamikah@davaomara.com).

BUSINESS NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ DATE: \_\_\_\_\_

**ARE YOU QUOTING?: Yes or No If so, will you be using UNION labor? Yes or No**

Our Company is a certified: DBE / WBE / MBE / VBE / OTHER subcontractor/supplier.

Please indicate type of certification (or if none, please mark N/A): \_\_\_\_\_

**PLEASE BE SURE THAT OUR OFFICE HAS A COPY OF YOUR CURRENT CERTIFICATE ON FILE. THANK YOU!**