

INVITATION TO BID

BID NO. SD-2026/27-5

SNOW REMOVAL SALT

The City of Hannibal, MO. will accept sealed bids for Snow Removal Salt until 11:00 AM, Local Time, Thursday, August 6th, 2026 in the Office of the City Clerk, City Hall, 320 Broadway, Hannibal, MO. 63401. Bids will then be opened and read aloud. Bids are for fiscal year 2026/27. (July 1, 2026 through June 30, 2027).

Specifications and Bid Forms may be obtained by calling the Department of Public Works Office located at 320 Broadway, Hannibal, Missouri, 63401.

Bids shall be submitted in a sealed envelope, clearly marked on the outside as "**Bid No. SD-2026/27-5 "Snow Removal Salt"**".

Bidder shall be an Equal Employment Opportunity Employer.

The City reserves the right to accept or reject any or all bids and/or combinations thereof, and to waive any minor irregularities.

The City of Hannibal is an Equal Employment Opportunity Employer.
(M-F-H).

CITY OF HANNIBAL, MISSOURI
SPECIFICATIONS FOR SNOW REMOVAL SALT
BID NO. SD-2026/27-5

It is the intent of the City of Hannibal, Missouri to purchase rock salt for snow removal during Fiscal Year 2026/27 (July 1, 2026 through June 30, 2027).

Approximate tonnage required is 400 tons $\pm$, and deliveries shall be made to the Street Department Salt Bin, located at 701 Warren Barrett Drive, Hannibal, MO., as requested by the Street Department.

If successful bidder fails to deliver within seven (7) days from date of order, the City of Hannibal reserves the right to order from another company.

Any inquiries or notices of intent to deliver should be made by calling Dave Todd at 573-629-7132, Street Department Supervisor, City of Hannibal, at the following telephone number:

Bidder to indicate on Bid Forms the approximate delivery time from date of order.

SNOW REMOVAL SALT

BID NO. SD-2026/27-5

BID SCHEDULE

(NOTE: Bids shall include any applicable taxes or fees.)

<u>ITEM</u>	<u>UNIT</u>	<u>UNIT PRICE DELIVERED</u>
Snow Removal Salt	Ton	\$ _____

Indicate approximate delivery time by your firm upon receipt of order from the City:

Indicate telephone number to be called for placing orders:

BY: _____
Company Name

Signature

Typed Name & Title

Seal if by corporation:

Address

Telephone

Date

ATTEST:

Signature

Date

