

SAUK COUNTY HEALTH CARE CENTER CROPLAND BID TEMPLATE

Notice is hereby given that the County will receive Bids per specifications until 2:00 PM, October 25, 2024 (CST) (“Closing”), to provide bids for leasing cropland located at the Sauk County Health Care Center. No Bids will be received or considered after that time.

Submittals should be limited to 8.5 x 11 sheet size and should be submitted in sealed envelopes to Sauk County Land Resources and Environment Department, 505 Broadway, Ste. 248, Baraboo, WI 53913. **The sealed envelope should be marked “Sauk County Health Care Center - Cropland Bid.”**

**Cover Letter** The cover letter should include the name, address, phone number, email address, and original signature of an individual with authority to negotiate on behalf of and to contractually bind the bidder, and who may be contacted during the period of bid evaluation.

Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Cash rent.** Provide the cash rent per acre being bid along with total annual rent (dollars per acre multiplied by 11.4 acres).

Rental Rate.....\$ \_\_\_\_\_ per acre

Annual payment (rental rate \* 11.4 acres) .....\$ \_\_\_\_\_ per year

**Experience and Qualifications.** Provide a summary describing experience utilizing practices outlined in the Scope of Work. Include any previous experience working with the Department in any rental agreement, contract or program participation.

**Available Technology.** Describe the technology that will be used to document planting and harvesting data.

**References.**

*Professional/personal Reference (list 1)*

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

*Credit References (List 2)*

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_