



8adsde State #o u

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g the p e p oposal o fe e e a d pa ti ipate i a dis ussio s held at
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e. Offe o s ho fail to follo this fo at a e dis ualified fo

Effect of Termination: All outstanding obligations shall be deemed to have been paid on the date of termination. Such payments shall be made no later than thirty days after the date of termination.

the information to that specified here. The application should take place in the first week of the year of the college.

-jy@U-Vu@t-Vu\k'

Office is required to provide the college a listing of all employees to be added proposed for the next year. The employees to be added should be provided to the college in the first week of the year. The information should be provided to the college in the first week of the year.

Offe o 's failu e to p ope l ai tai #ollege la ds ape a d g ou ds

The #ollege ill dete i e if pla t ate ial shall e epla ed due to i p ope ai te a e o egle to due to i u sta es e o d the Offe o 's o t ol. If pla ts ust e

Application rate: gallo s/ea h t ee.

E. P o ide li e appli atio fo tu f a d seeded a eas ased o soil test esults. Su essful

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 i te fe e ith pa ki g, pote tial da age to ehi les, effe ti e ess/ ualit of o k.
 . 7i ish U o i g; A eas to e fi ished o ed ill e dis ussed at the p e p oposal o fe e e.

#. #o e Ae ati g:
 . Ae atio of sod a eas shall o u o e ea h ea du i g id sp i go late su e usi g
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 " eak up a d lea up o es.

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UyG#=@8

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 o pletel epla e ul h a d Pi e sta i all pla ti ga eas, the egi i g of fall
 a d sp i g te . Di e to of 7a ilities ill p o ide dates fo ea h te .
 Su essful Offe o ill p o ide ul h a d pi e sta . Appli atio s ust e s heduled
 ith #ollege ep ese tati e. Pi e sta a d U ul h ill eed to e app o ed the #ollege.

ouk° @=u-V@8

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- ° **K**
- . Pu esh us that ha e e o e too la ge o out of shape.
- . I spe tpla ts shu sa d teesa de o ea da aged o dead ooda d/o shu s.
- . I spe tpla ti ga easa de o ea de iso litte .
- .

. I spe t all a eas fo i se t a d disease da age a d t eat as e essa eekl .
 . ke o ea i te a d/o ea l sp i g olo afte loo i g.
 . ‡ ate la sa d pla ted a eas as eeded.
 . Pu e sh u safte the ha e loo ed.
 . I spe t all pla tsa d t ees fo i se tsa d/o diseases a d t eat, as e essa .
 . Appl p e e e ge t to a atu al a eas.
 . Pu e hedges to keep shape a d fo , as e essa .
 . Ha d eed all ed a eas as eeded.
 . Appl p e e ti e spa fo la e uga d leaf i e .
 . ke o e lea esa d litte o all la , st eets, pa ki ga eas, a d sto d ai sas eeded.

- ····U ·

. Pu e a d fe tilize a ieties that ha e o pleted loo i g.
 . U o a d edge all la a eas to ½ to as eeded.
 . Spot spa fo eeds i pla ted a d atu al a eas.
 . Ha d ‡ eed all gou d o e a d ed a eas as eeded.
 . #lea up litte o la a d ha d su fa e a eas as eeded.
 . I spe t all la d

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appli atio s ith ea h o th i oi e. This log ill e a o plete a ou t of ea h fe tilize
a d he i al appli atio pe fo ed ithi the o th o eed that i oi e i ludi g date,
ti e, eathe o ditio s, a d spe ifi pu pose a d p odu t of ea h appli atio .

Value of #0 pa : _____

quoted prices must include all labor, equipment, tools, transportation, insurance, and supplies/materials, to be for all the items specified herein.

The Offeror certifies that prices listed below are indicative of the actual cost of the materials.

Offeror must submit proposal for all materials listed.

East Road #1000 8adsde \$ _____

1/2 mile Dike 8adsde Uai #1000 \$ _____

1/2 mile Street 8adsde \$ _____

Area #1000 8adsde \$ _____

1/2 mile #1000 8adsde \$ _____

I acknowledge receipt of the 7/1/2014 #e f A P+

Value of # of pa : _____

Provide the o pa 's ualifi atio su a . The su a should de o st ate the o pa 's apa ilit to provide g ou d a d la ds api g ai te a ese ies. I lude the o pa st u tu e, the u e of e plo ees
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