

# CITY OF COTTLEVILLE SALE OF SURPLUS PROPERTY

## INFORMATION FOR BIDDERS

### General Information:

- The City of Cottleville is accepting sealed bids for the sale of a **Fitness Reality Back Stretcher S/N 1175612500304**
- The item is available for viewing by contacting the Cottleville Police Department, Monday – Friday, 9 a.m. to 4 p.m.
- All items are sold AS-IS, WHERE-IS
- Item may be viewed at the Cottleville Police Department, by appointment only, between the hours of 9:00 am to 4:00 pm. Please Call 636-498-6464 to schedule and appointment.

### Bid Format:

- All bids must be submitted using the City's required bid form and include signed and notarized "*Waiver and Release of Liability Form*" provided by the City.

### Bid Submittal:

- Sealed bids will be accepted May 09, 2025 at 9:00 am through June 7, 2025 at 4:00 pm.
- Bids received after the specified ending time will not be considered. The bidder is solely responsible for timely delivery of their bid.
- Each bid must be submitted in a sealed envelope and plainly marked on the outside as SALE OF SURPLUS PROPERTY and addressed to:  
*City of Cottleville*  
*Attn: City Administrator*  
*5490 Fifth St.*  
*Cottleville, MO 63304.*

### Payment and Pickup:

- The winning bidder will be contacted within 5 business days of the bid closing.
- Winning bidder must provide all payments in full by cashiers check payable to the City of Cottleville and take possession within 10 days after the bid award notification or bid shall become void.



Fitness Reality Back Stretcher  
(s/n 117561251000304)

# CITY OF COTTLEVILLE SURPLUS PROPERTY BID FORM

Property: Fitness Realty Back Stretcher

S/N: 1175612500304

**BID PRICE:** -

Bidder Name:

Bidder Company:

Bidder Address :

Bidder Email:  Phone Number

1. The City of Cottleville reserves the right to reject any and all bids.
2. The winning bidder will be contacted within 5 days of the bid closing date.
3. All payments shall be in the form of a cashier's check payable to the City of Cottleville.
4. Winning bidder must provide all payments in full and take possession within 10 days after the bid award notification or bid shall become void.
5. **Bid submittal must include a signed Waiver and Release of Liability provided by the City.**
6. All surplus property is sold, AS-IS, WHERE-IS
7. The City of Cottleville offers no warranty or guarantee on any surplus property.

**Signature:**  **Date:**

**Printed Name:**

WAIVER AND RELEASE OF LIABILITY

I, \_\_\_\_\_ understand and acknowledge that I am purchasing a **Fitness Reality Back Stretcher S/N 11756125000304** from the City of Cottleville, Missouri, with no warranty, no guarantee and in **AS IN CONDITION**. I understand and acknowledge that the **Fitness Reality Back Stretcher** may or may not have the necessary safeguards to meet today's safety standards. I understand and acknowledge that the City of Cottleville has not inspected the **Fitness Reality Back Stretcher** in any way and that no employee, officer, or representative of the City of Cottleville is making any representations or statements regarding the condition or quality of the **Fitness Reality Back Stretcher**. I voluntarily and knowingly release the City of Cottleville from any and all liability and damages of any kind and nature in the event of any accident or injury, including death, and including as to property damage, resulting from or caused in any way by the **Fitness Reality Back Stretcher**. I further agree to defend and indemnify against the City of Cottleville in any action of any kind and any nature brought by any third person against the City of Cottleville alleging any injuries or damages, including death, allegedly caused in whole or in part by any failure or other defect related to the **Fitness Reality Back Stretcher**.

\_\_\_\_\_  
DATE: \_\_\_\_\_

Signature

\_\_\_\_\_  
Printed Name

**ACKNOWLEDGEMENT**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, in the year 2025, before me personally appeared \_\_\_\_\_ Waiver and Release of Liability and acknowledged to me that they executed the same for the purposes therein stated.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official set in the county and state aforesaid the day and year written above.

Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_