# **Attachment A**

**Technical Proposal Forms**

The following forms must be included within the Technical Proposal. However, please refer to Section 00300 for further required contents of the technical proposal. Completion of these forms is not the entire technical proposal.

-Key Personnel Form

-Firm Experience Form

-Project Approach / Preliminary Schedule

-Company Profile/Annual Sales Volume Form

-Current Workload Form

-MBE –Attachment H-1A, Certified MBE Utilization and Fair Solicitation Affidavit #1-2 **(forms located in Attachment H) (Note: This is non-curable; if this form is not included in the Technical Proposal, the proposal will be classified as not susceptible of the award.)**

-Bid/Proposal Affidavit

-eBuilder Affidavit

-Acknowledgment of Receipt of Addenda Form (if applicable)

-Contractors COVID-19 Acknowledgment Form

It is the Proposer’s responsibility to thoroughly review the RFP documents, in particularly Section 300, to ensure all required contents are submitted.

**RFP FOR THE SCHOOL OF PHARMACY ELECTRICAL RENEWAL SYSTEM AT UMB**

**RFP** **#19-315 - WG**

**KEY PERSONNEL FORM**

**Proposing Firm:**

1. **PERSON'S NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **POSITION TO BE ASSIGNED:**

\_\_\_\_\_\_\_PROJECT MANAGER \_\_\_\_\_\_\_FIELD SUPERINTENDENT/FOREMAN

**PM’S MINIMUM PERCENT (%) OF TIME COMMITMENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%**

1. **EDUCATIONAL BACKGROUND**:

Institution Degree/Diploma/ Major (if any)

Certificates (If or H.S. Diploma

Applicable)

1. **EMPLOYMENT HISTORY\***: (\*NOTE: If a person has more than three (3) employers in his/her employment history, please provide complete employment history via supplemental page(s) attached to this form.)
   1. CURRENT EMPLOYER'S NAME:

DATES OF EMPLOYMENT:

POSITION HELD DURATION BY DATE

* 1. PRIOR EMPLOYER'S NAME:

DATES OF EMPLOYMENT:

POSITION HELD DURATION BY DATE

4.3 PRIOR EMPLOYER'S NAME:

DATES OF EMPLOYMENT:

POSITION HELD DURATION BY DATE

1. **SIMILAR RELEVANT PROJECT EXPERIENCE/REFERENCES**:

On the following pages provide a **full** description of Key Person’s project experience. (Note: As indicated in the solicitation document, references are to be **project references not employment references;** that is, the University is interested in speaking to a Project Owner (preferably) or the GC or DB or CM regarding the person's performance on a particular project.)

**PROJECT REFERENCE CONTACT PERSON & TITLE**:

**TELEPHONE #: Extension No (if applicable) \_\_\_\_\_\_\_\_\_\_\_**

**EMAIL Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY NAME:**

**DESCRIPTION OF CONTRACT/PROJECT DONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLE OF PERSON (Describe tasks that were this person’s responsibility):**

**CONSTRUCTION DOLLAR SIZE:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SQUARE FOOTAGE OF PROJECT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTRACT METHOD:** \_\_\_ GC \_\_\_\_DB \_\_\_\_\_ CM \_\_\_\_\_\_Trade Contractor/Subcontractor

**SETTING: \_\_\_\_\_\_\_\_OCCUPIED \_\_\_\_\_\_\_\_\_\_HIGHER EDUCATION**

**\_\_\_\_\_\_\_\_\_\_ACADEMIC HEALTHCARE FACILITY**

**SCHEDULE OF PROJECT (START AND END DATES):**

## **DURATION KEY PERSON WAS ON THE PROJECT:**

Note: If key person not assigned for the full duration of the project, explain:

**Why is this project similar/relevant** to the University’s project? (Refer to page 00300 for criteria.)

1. **PROJECT REFERENCE CONTACT PERSON & TITLE**:

**TELEPHONE #: EXTENSION #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COMPANY NAME:**

**DESCRIPTION OF CONTRACT/PROJECT DONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLE OF PERSON (Describe tasks that were this person’s responsibility):**

**CONSTRUCTION DOLLAR SIZE:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SQUARE FOOTAGE OF PROJECT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTRACT METHOD:** \_\_\_ GC \_\_\_\_DB \_\_\_\_\_CM

\_\_\_\_ TRADE CONTRACTOR/SUBCONTRACTOR

**SETTING: \_\_\_\_\_\_\_\_OCCUPIED \_\_\_\_\_\_\_\_\_\_HIGHER EDUCATION**

**\_\_\_\_\_\_\_\_\_\_ACADEMIC HEALTHCARE FACILITY**

**SCHEDULE OF PROJECT (START AND END DATES):**

## **DURATION KEY PERSON WAS ON THE PROJECT:**

Note: If key person not assigned for the full duration of the project, explain:

**Why is this project similar/relevant** to the University’s project? (Refer to page 00300 for criteria.)

1. **PROJECT REFERENCE CONTACT PERSON & TITLE**:

**TELEPHONE #: EXTENSION #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COMPANY NAME:**

**DESCRIPTION OF CONTRACT/PROJECT DONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLE OF PERSON (Describe tasks that were this person’s responsibility):**

**CONSTRUCTION DOLLAR SIZE:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SQUARE FOOTAGE OF PROJECT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTRACT METHOD:** \_\_\_ GC \_\_\_\_CM \_\_\_\_\_DB

\_\_\_\_TRADE CONTRACTOR/SUBCONTRACTOR

**SETTING: \_\_\_\_\_\_\_\_OCCUPIED \_\_\_\_\_\_\_\_\_\_HIGHER EDUCATION**

**\_\_\_\_\_\_\_\_\_\_ACADEMIC HEALTHCARE FACILITY**

**SCHEDULE OF PROJECT (START AND END DATES):**

## **DURATION KEY PERSON WAS ON THE PROJECT:**

Note: If key person not assigned for the full duration of the project, explain:

**Why is this project similar/relevant** to the University’s project? (Refer to page 00300 for criteria.)

NOTE: For each Key Person, the Proposing Firm may attach other relevant similar project experience to this form.

**8 ACHIEVEMENTS/OTHER NOTATIONS (NOT REQUIRED)**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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NOTE: If a Proposer finds the space provided to be insufficient, he can attach additional pages to this form as he finds appropriate and just indicate on this form to see attached pages.

12.0021 (Rev 4/02)

PROPOSER: ARCHITECT'S/ENGINEER’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT NAME: \_\_\_\_\_\_\_ ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT OWNER'S NAME: \_\_\_\_\_\_\_ PROPOSER PROJECT MANAGER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_ PROPOSER FIELD SUPERINTENDENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_ CONSTRUCTION DOLLAR VOL. $ (BASE)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CHANGE ORDER DOLLAR VOL. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If Change Orders are greater than 10% (above or below) the Base Construction Price, provide explanation.)

OWNER'S CONTACT PERSON: TOTAL CONSTRUCTION $ VOL: $ \*

(BASE CONTRACT PLUS C/Os)

TELEPHONE NUMBER: ( ) EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT START DATE: \_\_\_\_\_ CONSTRUCTION METHOD: \_\_\_ GC \_\_\_\_\_DB \_\_\_\_\_CM Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT COMPLETION DATE\*\*: \_\_\_\_\_ TOTAL GROSS SQUARE FOOTAGE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(CHECK ALL THAT APPLY):

TYPE OF PROJECT: LARGE SWITCHGEAR/HIGH VOLTAGE (15KV) (1 OF 3 SHOULD BE THIS)

\_ PHASED INSTALLATION/REPLACEMENT OF 480V ELECTRICAL SERVICE EQUIPMENT (1 OF 3 SHOULD BE THIS)

PERFORMED IN EXISTING OPERATIONAL BULIDING (2 OF 3 SHOULD BE THIS)

\_\_\_\_\_\_\_ ACADEMIC HEALTHCARE/HIGHER EDUCATION SETTING (1 OF 3 SHOULD BE THIS)

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NOTE: All of the projects a) should have been constructed in the last 10 years, and, b) must have been done by the proposing firm. \*Preferable that projects should be at least one million five hundred thousand dollars ($1,500,000). \*\* One (1) project must be complete and occupied for at least six (6) months; One (1) project may be substantially complete (available for use for its intended purpose); and One (1) project may be in construction, but must be at least 50% complete with completed projects preferred. See Section 00300 of the RFP for further details.

PROPOSER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**TRADES INCLUDED: (check all that apply)**

Mechanical (HVAC) (name system type: ) Electrical: Voltage: \_\_\_\_\_\_\_\_\_\_\_\_; Electrical Equipment Voltage: \_\_\_\_\_\_\_\_\_\_

\_\_\_ Electrical \_\_\_\_\_Site Work \_\_\_\_\_Remotely-Controlled Automated Switchgear \_\_\_\_ Paralleling Distributed Generation with Utility

Plumbing Masonry Concrete Systems Integration: Provided by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Provider/Subcontractor)

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**TYPE OF SERVICES PROVIDED: (Check all that apply)**

Construction Phase: Cost Control Project Schedule Project Control Services Award and manage trade contracts Project Safety

Quality Assurance/Inspections Change Order Review/Processing Shop Drawing/Submittal Review/Processing Project Site Documents

Claims Avoidance/Resolution Contract Close Out Monthly Written Reports to Owner

**OVERALL DESCRIPTION**

**OF THIS PROJECT DESCRIBE SITE CONSTRAINTS, IF ANY:**

\_\_\_\_\_\_\_\_\_\_\_\_\_

**OVERALL DESCRIPTION OF ELECTRICAL WORK INVOLVING SWITCHGEAR, RELAYING, GENRATOR SYSTEMS, REMOTELY-CONTROLLED AUTOMATED SWITCHGEAR AND PARALLELING DISTRIBUTED GENERATION WITH THE UTILITY:**

**DESCRIBE THE SIMILARITIES OF THIS PROJECT TO THE ELECTRICAL INFRASTRUCTURE UPGRADES PHASE 1C AT UMB:**

\_\_\_\_\_\_\_

**LIST BELOW ALL PROPOSED ELECTRICAL CONTRACTOR TEAM MEMBERS WHO WORKED ON THIS JOB BY NAME AND POSITION**:

TEAM MEMBER POSITION HELD ON THIS PROJECT

\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT APPROACH / PRELIMINARY SCHEDULE**

1. Identify the most challenging aspect of this project in your firm’s assessment and the approach/methodologies that are proposed to handle this challenge.
2. Provide a preliminary schedule (Bar Chart, Gantt Chart or CPM; preferably CPM) to include the following:
   * + 1. Major components of work.
       2. Incorporate design engineers outage durations within your project schedule
       3. Notice to Proceed
       4. Substantial Completion
       5. Final Completion
       6. Procurement duration of key materials, long lead items and equipment.
3. If the proposed schedule includes more than one (1) shift, indicate the proposed work hours for each shift and any other considerations associated with the additional shift(s).

The preliminary schedule shall identify the project critical path.

**COMPANY PROFILE/SALES VOLUME OF PROPOSER**

**SOP ELECTRICAL RENEWAL, Page 1 of 2**

**COMPANY NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS OF COMPANY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE OF INCORPORATION:**   **STATE OF INCORPORATION:** \_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF ORGANIZATION (I.E., CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NUMBER OF GEOGRAPHIC LOCATIONS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LOCATION OF ALL GEOGRAPHIC OFFICES (if applicable) AND THEIR FUNCTION**

**LOCATION: FUNCTION:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**LOCATION OF BRANCH OFFICE WHICH WILL SERVICE UMB:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF SERVICES SUPPLIED: (CHECK ALL THAT ARE APPLICABLE)

**\_\_\_\_\_\_\_ GENERAL CONTRACTING \_\_\_\_\_\_\_\_\_ELECTRICAL SUBCONTRACTOR/TRADE**

**\_\_\_\_\_\_\_\_HIGH VOLTAGE/SWITCHGEAR (15KV)**

**\_\_\_\_\_\_\_ PROVIDE AND INSTALL REMOTELY-CONTROLLED AUTOMATED SWITCHGEAR**

**\_\_\_\_\_\_\_UPGRADES TO EMERGENCY POWER SYSTEM INCLUDING AUTOMATIC TANSFER SWITCHES**

**\_\_\_\_\_\_\_ADDITION OF TEMPORARY GENERATOR DOCKING STATION**

**\_\_\_\_\_\_\_ OTHER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**# OF YEARS IN CONSTRUCTION BUSINESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**# OF YEARS PROVIDING HIGH VOLTAGE ELECTRICAL WORK: \_\_\_\_\_\_\_\_**

**# OF YEARS PROVIDING GENERAL CONTRACTING SERVICES:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**# OF YEARS IN BUSINESS UNDER PRESENT NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OTHER OR FORMER NAMES UNDER WHICH YOUR ORGANIZATION HAS OPERATED:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TYPE OF ORGANIZATION (I.E. CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE, ETC.)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**NAME OF PRINCIPAL(S) AND TITLE(S):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**BRIEF HISTORY OF COMPANY:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**TYPE OF WORK PROVIDED:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**TOTAL COMPANY BRANCH OFFICE**

**WHICH WILL**

**SERVICE UMB:**

**TOTAL NUMBER OF EMPLOYEES:** \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**NUMBER OF PROJECT MANAGERS/** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRINCIPAL COORDINATORS:**

**NUMBER OF FIELD SUPERINTENDENTS** \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**NUMBER OF FIELD EMPLOYEES:** \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**(EXCLUDING SUPERVISORY)**

**ACCOUNTING/BUSINESS OFFICE STAFF:** \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**BONDING COMPANY\*\***:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **BONDING CAPACITY**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMR RATING: 2019 \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2018\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2017\_\_\_\_\_\_\_\_\_\_\_\_\_**

**YEAR SALES $ VOLUME\* # OF PROJECTS # of LARGEST GC Trade/**

**COMPLETED High Voltage ELECTRICAL Subcontractor**

**Projects PROJECT SIZE**

2019 $ \_\_\_\_\_\_\_\_\_\_\_ $ % %

2018 $ \_\_\_\_\_\_\_\_\_\_\_ $ % %

2017 $ \_\_\_\_\_\_\_\_\_\_\_ $ % %

\*The above sales volume and completed project figures are to reflect the sales data for the **local office** that will manage this contract, not the parent company:

**RFP FOR THE SCHOOL OF PHARMACY ELECTRICAL RENEWAL SYSTEM AT UMB**

**RFP** **#19-315 – WG**

CURRENT WORKLOAD

PROPOSING FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Below find a list of the current projects on which our firm is committed, the dollar volume of each, % complete, the date of anticipated completion and whether bonds are applicable.

**PROJECT NAME DOLLAR VOLUME % COMPLETE ANTICIPATED BONDED? ASSIGNED ASSIGNED**

**COMPLETION YES/NO** **PROJECT FIELD**

**DATE (MONTH/YEAR) MANAGER SUPERINTENDENT**

\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_% \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

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Based on this current workload, provide a description of proposing firm's ability to accomplish the proposed services on this project within required time frame:

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**MBE Attachment H-1A:**

**MBE Utilization and Fair Solicitation Affidavit & MBE Participation Schedule**

# H-1 PART 2 - MBE UTILIZATION AND FAIR SOLICITATION AFFIDAVIT

## This MBE Utilization and Fair Solicitation Affidavit must be completed in its entirety and included with the Technical Proposal. If the bidder/offeror fails to accurately complete and submit this Affidavit with the Technical Proposal as required, the Procurement Officer shall deem the bid non-responsive or shall determine that the proposal is not reasonably susceptible of being selected for award. THIS IS NON-CURABLE.

### In connection with the bid/proposal submitted in response to Solicitation No. 19-315 WG , I affirm the following:

1. **MBE Participation (PLEASE CHECK ONLY ONE)**

☐I acknowledge and intend to meet IN FULL both the overall certified Minority Business Enterprise (MBE) participation goal of 10 percent (10%) and all of the following subgoals:

0 percent for African American-owned MBE firms

0 percent for Hispanic American-owned MBE firms

0 percent for Asian American-owned MBE firms

0 percent for Women-owned MBE firms

Therefore, I am not seeking a waiver pursuant to COMAR 21.11.03.11. I acknowledge that by checking the above box and agreeing to meet the stated goal and subgoal(s), if any, I **must** complete PART 3 - MBE Participation Schedule and Part 4 Signature Page in order to be considered for award.

**OR**

☐After making good faith outreach efforts prior to making this submission, I conclude that I am unable to achieve the MBE participation goal and/or subgoals. I hereby request a waiver, in whole or in part, of the overall goal and/or subgoals I acknowledge that by checking this box and requesting a partial waiver of the stated goal and/or one or more of the stated subgoal(s) if any, I must complete Part 3, the MBE Participation Schedule and Part 4 Signature Page for the portion of the goal and/or subgoal(s) if any, for which I am not seeking a waiver, in order to be

considered for award.

I acknowledge that by checking this box and requesting a full waiver of the stated goal and the stated subgoal(s) if any, I must complete Part 4 Signature Page in order to be considered for award.

## Additional MBE Documentation

### I understand that if I am notified that I am the apparent awardee or as requested by the Procurement Officer, I must submit the following documentation within 10 working days of receiving notice of the potential award or from the date of conditional award (per COMAR 21.11.03.10), whichever is earlier:

1. Good Faith Efforts Documentation to Support Waiver Request (Attachment D-1C)
2. Outreach Efforts Compliance Statement (Attachment D-2);
3. MBE Subcontractor/MBE Prime Project Participation Statement (Attachments D-3A and 3B);
4. Any other documentation, including additional waiver documentation if applicable, required by the Procurement Officer to ascertain bidder or offeror responsibility in connection with the certified MBE participation goal and subgoals, if any.

I understand that if I fail to return each completed document within the required time, the Procurement Officer may determine that I am not responsible and therefore not eligible for contract award. If the contract has already been awarded, the award is voidable.

**To complete Affidavit committing to MBE(s) or requesting waiver, Proposer must sign below:**

## I solemnly affirm under the penalties of perjury that: (i) I have reviewed the instructions for the MBE Utilization & Fair Solicitation Affidavit, and (ii) the information contained in the MBE Utilization & Fair Solicitation Affidavit is true to the best of my knowledge, information and belief.

### Proposer Name Signature of Authorized Representative

*(PLEASE PRINT OR TYPE)*

### Address Printed Name and Title

City, State and Zip Code Date

**SUBMIT THIS AFFIDAVIT WITH TECHNICAL PROPOSAL**

**E Builder**

**AFFIDAVIT**

**This document MUST BE included with the bid or offer. If the Bidder or Offeror fails to complete and submit this form with the bid or offer as required, the procurement officer shall deem the bid non-responsive or shall determine that the offer is not reasonably susceptible of being selected for award.**

In conjunction with the bid or offer submitted in response to Project Name: Electrical Infrastructure Upgrades Phase 1C at University of Maryland Baltimore Solicitation No. 17-317 - 1C ML, I affirm the following:

I acknowledge and intend to obtain an annual license for E Builder, and will submit all project documentation through eBuilder as instructed by UMB.

I solemnly affirm under the penalties of perjury that the contents of this Affidavit are true to the best of my knowledge, information, and belief.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Bidder/Offeror Firm Name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Affiant |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Printed Name, Title |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City, State, Zip | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fax |
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|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |

BID/PROPOSAL AFFIDAVIT – July, 2020

A. Authority

I HEREBY AFFIRM THAT:

I (print name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ possess the legal authority to make this Affidavit.

B. CERTIFICATION REGARDING COMMERCIAL NONDISCRIMINATION

The undersigned bidder hereby certifies and agrees that the following information is correct: In preparing its bid on this project, the bidder has considered all proposals submitted from qualified, potential subcontractors and suppliers, and has not engaged in “discrimination” as defined in §19-103 of the State Finance and Procurement Article of the Annotated Code of Maryland. “Discrimination” means any disadvantage, difference, distinction, or preference in the solicitation, selection, hiring, or commercial treatment of a vendor, subcontractor, or commercial customer on the basis of race, color, religion, ancestry, or national origin, sex, age, marital status, sexual orientation, sexual identity, genetic information or an individual’s refusal to submit to a genetic test or make available the results of a genetic test, disability, or any otherwise unlawful use of characteristics regarding the vendor’s, supplier’s, or commercial customer’s employees or owners. “Discrimination” also includes retaliating against any person or other entity for reporting any incident of “discrimination”. Without limiting any other provision of the solicitation on this project, it is understood that, if the certification is false, such false certification constitutes grounds for the State to reject the bid submitted by the bidder on this project, and terminate any contract awarded based on the bid. As part of its bid or proposal, the bidder herewith submits a list of all instances within the past 4 years where there has been a final adjudicated determination in a legal or administrative proceeding in the State of Maryland that the bidder discriminated against subcontractors, vendors, suppliers, or commercial customers, and a description of the status or resolution of that determination, including any remedial action taken. Bidder agrees to comply in all respects with the State’s Commercial Nondiscrimination Policy as described under Title 19 of the State Finance and Procurement Article of the Annotated Code of Maryland.

B-1. Certification Regarding Minority Business Enterprises.

The undersigned bidder hereby certifies and agrees that it has fully complied with the State Minority Business Enterprise Law, State Finance and Procurement Article, §14-308(a)(2), Annotated Code of Maryland, which provides that, except as otherwise provided by law, a contractor may not identify a certified minority business enterprise in a bid or proposal and:

(1) Fail to request, receive, or otherwise obtain authorization from the certified minority business enterprise to identify the certified minority proposal;

(2) Fail to notify the certified minority business enterprise before execution of the contract of its inclusion in the bid or proposal;

(3) Fail to use the certified minority business enterprise in the performance of the contract; or

(4) Pay the certified minority business enterprise solely for the use of its name in the bid or proposal.

Without limiting any other provision of the solicitation on this project, it is understood that if the certification is false, such false certification constitutes grounds for the State to reject the bid submitted by the bidder on this project, and terminate any contract awarded based on the bid.

B-2. Certification Regarding Veteran-Owned Small Business Enterprises. The undersigned bidder hereby certifies and agrees that it has fully complied with the State veteran-owned small business enterprise law, State Finance and Procurement Article, §14-605, Annotated Code of Maryland, which provides that a person may not:

(1) Knowingly and with intent to defraud, fraudulently obtain, attempt to obtain, or aid another person in fraudulently obtaining or attempting to obtain public money, procurement contracts, or funds expended under a procurement contract to which the person is not entitled under this title;

(2) Knowingly and with intent to defraud, fraudulently represent participation of a veteran–owned small business enterprise in order to obtain or retain a bid preference or a procurement contract;

(3) Willfully and knowingly make or subscribe to any statement, declaration, or other document that is fraudulent or false as to any material matter, whether or not that falsity or fraud is committed with the knowledge or consent of the person authorized or required to present the declaration, statement, or document;

(4) Willfully and knowingly aid, assist in, procure, counsel, or advise the preparation or presentation of a declaration, statement, or other document that is fraudulent or false as to any material matter, regardless of whether that falsity or fraud is committed with the knowledge or consent of the person authorized or required to present the declaration, statement, or document;

(5) Willfully and knowingly fail to file any declaration or notice with the unit that is required by COMAR 21.11.12; or

(6) Establish, knowingly aid in the establishment of, or exercise control over a business found to have violated a provision of §B-2(1)-(5) of this regulation.

C. AFFIRMATION REGARDING BRIBERY CONVICTIONS

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business (as is defined in Section 16-101(b) of the State Finance and Procurement Article of the Annotated Code of Maryland), or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities including obtaining or performing contracts with public bodies has been convicted of, or has had probation before judgment imposed pursuant to Criminal Procedure Article, §6-220, Annotated Code of Maryland, or has pleaded nolo contendere to a charge of, bribery, attempted bribery, or conspiracy to bribe in violation of Maryland law, or of the law of any other state or federal law, except as follows (indicate the reasons why the affirmation cannot be given and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of person(s) involved, and their current positions and responsibilities with the business):

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D. AFFIRMATION REGARDING OTHER CONVICTIONS

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities including obtaining or performing contracts with public bodies, has:

(1) Been convicted under state or federal statute of:

(a) A criminal offense incident to obtaining, attempting to obtain, or performing a public or private contract; or

(b) Fraud, embezzlement, theft, forgery, falsification or destruction of records or receiving stolen property;

(2) Been convicted of any criminal violation of a state or federal antitrust statute;

(3) Been convicted under the provisions of Title 18 of the United States Code for violation of the Racketeer Influenced and Corrupt Organization Act, 18 U.S.C. §1961 et seq., or the Mail Fraud Act, 18 U.S.C. §1341 et seq., for acts in connection with the submission of bids or proposals for a public or private contract;

(4) Been convicted of a violation of the State Minority Business Enterprise Law, §14-308 of the State Finance and Procurement Article of the Annotated Code of Maryland;

(5) Been convicted of a violation of §11-205.1 of the State Finance and Procurement Article of the Annotated Code of Maryland;

(6) Been convicted of conspiracy to commit any act or omission that would constitute grounds for conviction or liability under any law or statute described in subsections (1)-(5) above;

(7) Been found civilly liable under a state or federal antitrust statute for acts or omissions in connection with the submission of bids or proposals for a public or private contract;

(8) Been found in a final adjudicated decision to have violated the Commercial Nondiscrimination Policy under Title 19 of the State Finance and Procurement Article of the Annotated Code of Maryland with regard to a public or private contract;

(9) Been convicted of a violation of one or more of the following provisions of the Internal Revenue Code:

(a) §7201, Attempt to Evade or Defeat Tax;

(b) §7203, Willful Failure to File Return, Supply Information, or Pay Tax,

(c) §7205, Fraudulent Withholding Exemption Certificate or Failure to Supply Information,

(d) §7206, Fraud and False Statements, or

(e) §7207 Fraudulent Returns, Statements, or Other Documents;

(10) Been convicted of a violation of 18 U.S.C. §286 Conspiracy to Defraud the Government with Respect to Claims, 18 U.S.C. §287, False, Fictitious, or Fraudulent Claims, or 18 U.S.C. §371, Conspiracy to Defraud the United States;

(11) Been convicted of a violation of the Tax-General Article, Title 13, Subtitle 7 or Subtitle 10, Annotated Code of Maryland;

(12) Been found to have willfully or knowingly violated State Prevailing Wage Laws as provided in the State Finance and Procurement Article, Title 17, Subtitle 2, Annotated Code of Maryland, if:

(a) A court:

(i) Made the finding; and

(ii) Decision became final; or

(b) The finding was:

(i) Made in a contested case under the Maryland Administrative Procedure Act; and

(ii) Not overturned on judicial review;

(13) Been found to have willfully or knowingly violated State Living Wage Laws as provided in the State Finance and Procurement Article, Title 18, Annotated Code of Maryland, if:

(a) A court:

(i) Made the finding; and

(ii) Decision became final; or

(b) The finding was:

(i) Made in a contested case under the Maryland Administrative Procedure Act; and

(ii) Not overturned on judicial review;

(14) Been found to have willfully or knowingly violated the Labor and Employment Article, Title 3, Subtitles 3, 4, or 5, or Title 5, Annotated Code of Maryland, if:

(a) A court:

(i) Made the finding; and

(ii) Decision became final; or

(b) The finding was:

(i) Made in a contested case under the Maryland Administrative Procedure Act; and

(ii) Not overturned on judicial review; or

(15) Admitted in writing or under oath, during the course of an official investigation or other proceedings, acts or omissions that would constitute grounds for conviction or liability under any law or statute described in §§B and C and subsections D(1)-(14) of this regulation, except as follows (indicate reasons why the affirmations cannot be given, and list any conviction, plea, or imposition of probation before judgment with the date, court, official or administrative body, the sentence or disposition, the name(s) of the person(s) involved and their current positions and responsibilities with the business, and the status of any debarment):

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E. AFFIRMATION REGARDING DEBARMENT

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, or any of its officers, directors, partners, controlling stockholders, or any of its employees directly involved in the business's contracting activities, including obtaining or performing contracts with public bodies, has ever been suspended or debarred (including being issued a limited denial of participation) by any public entity, except as follows (list each debarment or suspension providing the dates of the suspension or debarment, the name of the public entity and the status of the proceedings, the name(s) of the person(s) involved and their current positions and responsibilities with the business, the grounds of the debarment or suspension, and the details of each person's involvement in any activity that formed the grounds of the debarment or suspension).

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F. AFFIRMATION REGARDING DEBARMENT OF RELATED ENTITIES

I FURTHER AFFIRM THAT:

(1) The business was not established and it does not operate in a manner designed to evade the application of or defeat the purpose of debarment pursuant to Sections 16-101, et seq., of the State Finance and Procurement Article of the Annotated Code of Maryland; and

(2) The business is not a successor, assignee, subsidiary, or affiliate of a suspended or debarred business, except as follows (you must indicate the reasons why the affirmations cannot be given without qualification):

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G. SUB-CONTRACT AFFIRMATION

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business, has knowingly entered into a contract with a public body under which a person debarred or suspended under Title 16 of the State Finance and Procurement Article of the Annotated Code of Maryland will provide, directly or indirectly, supplies, services, architectural services, construction related services, leases of real property, or construction.

H. AFFIRMATION REGARDING COLLUSION

I FURTHER AFFIRM THAT:

Neither I, nor to the best of my knowledge, information, and belief, the above business has:

(1) Agreed, conspired, connived, or colluded to produce a deceptive show of competition in the compilation of the accompanying bid or offer that is being submitted;

(2) In any manner, directly or indirectly, entered into any agreement of any kind to fix the bid price or price proposal of the bidder or offeror or of any competitor, or otherwise taken any action in restraint of free competitive bidding in connection with the contract for which the accompanying bid or offer is submitted.

I. CERTIFICATION OF TAX PAYMENT

I FURTHER AFFIRM THAT: Except as validly contested, the business has paid, or has arranged for payment of, all taxes due the State of Maryland and has filed all required returns and reports with the Comptroller of the Treasury, the State Department of Assessments and Taxation, and the Maryland Department of Labor, as applicable, and will have paid all withholding taxes due the State of Maryland prior to final settlement.

J. CONTINGENT FEES

I FURTHER AFFIRM THAT:

The business has not employed or retained any person, partnership, corporation, or other entity, other than a bona fide employee, bona fide agent, bona fide salesperson, or commercial selling agency working for the business, to solicit or secure the Contract, and that the business has not paid or agreed to pay any person, partnership, corporation, or other entity, other than a bona fide employee, bona fide agent, bona fide salesperson, or commercial selling agency, any fee or any other consideration contingent on the making of the Contract.

K. CERTIFICATION REGARDING INVESTMENTS IN IRAN

(1) The undersigned certifies that, in accordance with State Finance and Procurement Article, §17-705, Annotated Code of Maryland:

(a) It is not identified on the list created by the Board of Public Works as a person engaging in investment activities in Iran as described in State Finance and Procurement Article, §17-702, Annotated Code of Maryland; and

(b) It is not engaging in investment activities in Iran as described in State Finance and Procurement Article, §17-702, Annotated Code of Maryland.

2. The undersigned is unable to make the above certification regarding its investment activities in Iran due to the following activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

L. CONFLICT MINERALS ORIGINATED IN THE DEMOCRATIC REPUBLIC OF CONGO (FOR SUPPLIES AND SERVICES CONTRACTS)

I FURTHER AFFIRM THAT:

The business has complied with the provisions of State Finance and Procurement Article, §14-413, Annotated Code of Maryland governing proper disclosure of certain information regarding conflict minerals originating in the Democratic Republic of Congo or its neighboring countries as required by federal law.

M. I FURTHER AFFIRM THAT:

Any claims of environmental attributes made relating to a product or service included in the bid or proposal are consistent with the Federal Trade Commission’s Guides for the Use of Environmental Marketing Claims as provided in 16 CFR §260, that apply to claims about the environmental attributes of a product, package, or service in connection with the marketing, offering for sale, or sale of such item or service.

N. ACKNOWLEDGEMENT

I ACKNOWLEDGE THAT this Affidavit is to be furnished to the Procurement Officer and may be distributed to units of: (1) the State of Maryland; (2) counties or other subdivisions of the State of Maryland; (3) other states; and (4) the federal government. I further acknowledge that this Affidavit is subject to applicable laws of the United States and the State of Maryland, both criminal and civil, and that nothing in this Affidavit or any contract resulting from the submission of this bid or proposal shall be construed to supersede, amend, modify or waive, on behalf of the State of Maryland, or any unit of the State of Maryland having jurisdiction, the exercise of any statutory right or remedy conferred by the Constitution and the laws of Maryland with respect to any misrepresentation made or any violation of the obligations, terms and covenants undertaken by the above business with respect to (1) this Affidavit, (2) the contract, and (3) other Affidavits comprising part of the contract.

I DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

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

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name of Authorized Representative and Affiant)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature of Authorized Representative and Affiant)

**RFP NO.**: 19-315 WG

**RFP FOR**: SOP ELECTRICAL RENEWAL UNIVERSITY OF MARYLAND BALTIMORE

**DUE DATE**: Tuesday, January 12, 2020 AT 5:00pm

**NAME OF PROPOSER**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA**

The undersigned, hereby acknowledges the receipt of the following addenda:

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Addendum No. dated

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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