BID RESPONSE PACKET 710-25-064

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION							
Company:							
Address:							
City:			State:		Zip Cod	e:	
Business Designation:	☐ Individual☐ Partnership	□ Sole □ Corp	Proprietorship oration		☐ Public S		e Corp
Minority and	☐ Not Applicable	☐ America	n Indian	☐ Service	e-Disabled Ve	teran	
Women-Owned	☐ African American	ufrican American ☐ Hispanic American ☐ Women-Owned					
Designation*:	☐ Asian American	☐ Pacific Is	slander American				
	AR Certification #:	Certification #: * See Minority and Women-Owned Business Policy					
PROSPECTIVE CONTRACTOR CONTACT INFORMATION Provide contact information to be used for bid solicitation related matters.							
Contact Person:			Title:				
Phone:			Alternate Phone:				
Email:							
	CON	IFIRMATION C	F REDACTED CO	PY			
 ☐ YES, a redacted copy of submission documents is enclosed. ☐ NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. 					ted submission		
checked, a released in	d copy of the submission copy of the non-redacted response to any requestor additional information.	documents, wi	th the exception of	f financia	l data (other i	than	pricing), will be
	COI	MBINDED CER	TIFICATIONS FOR	RM			
Prospective Contractor has included, in this <i>Bid Response Packet</i> , the signed Attachment H - Combined Certifications for Contracting with the State of Arkansas.							
The signature below	zed to bind the Prospect v signifies agreement that b ctive Contractor's bid to l	any exception t	hat conflicts with a		•		icitation will
Authorized Signat	uthorized Signature: Title:						
Printed/Typed Nar	rinted/Typed Name: Date:						

	SECTIONS 1 - 4	4 VENDOR AGR	EEMENT AND C	<u>OMPLIANCE</u>
•	Any requested exceptions to attachment to this page. Vereference the specific solicities and the specific solicities are specific solicities.	/endor must clearly expla	in the requested exception	must be declared below or as ar and should label the request to
•	Exceptions to Requirement	ts shall cause Vendor's pro	pposal to be disqualified.	
sy sign:	ature below, Vendor agrees	s to and shall fully comply	with all requirements as sho	wn in the <i>bid solicitation</i> .
Vend	or Name:		Date:	
Signa	ature:		Title:	
	ed Name:		-	

PROPOSED SUBCONTRACTORS FORM

• **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information:

Street Address	City, State, ZIP
	Street Address

☐ PROSPECTIVE CONTRACTOR DOES NOT PROPOSE	TO USE	Ε
SUBCONTRACTORS TO PERFORM SERVICES.		

MINIMUM QUALIFICATIONS

• In accordance with Section 2.3.B, provide the name, address, and telephone number of the supervisor who will inspect the building for each location being bid at least once a week to ensure compliance with all contract requirements:

County	Name	Address	Phone Number
Scott			
Stone			
Washington			
Woodruff			
Howard			
Lincoln			
Little River			
Perry			

DOCUMENTATION CHECKLIST

As outlined in section 2.3 Minimum Qualifications in the solicitation document, please provide the following:

- Active registration from the Arkansas Secretary of State's Office, or other state approved documentation
- Official Bid Price Sheet
- All documents provided in the Bid Response Packet
- Copy of Vendor's Equal Opportunity Policy
- Signed Addenda, if applicable
- EO 98-04 Disclosure Form (Attachment A)
- Combined Certifications (Attachment H)
- Client History Form (Attachment F)
- Mandatory Site Visit Verification Form (Attachment B)