BID RESPONSE PACKET 710-25-071

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION						
Company:						
Address:						
City:			State:		Zip Code:	
Business Designation:	 Individual Partnership 		Sole Proprietorship Corporation		Public Service Corp Nonprofit	
Minority and Women-Owned Designation*:	 Not Applicable African American Asian American AR Certification #: 	American Indian Service-Disabled Veteran Hispanic American Pacific Islander American * 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:						
	CO	NFIRMATION O	F REDACTED COPY	,		
 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. 						
Note: If a redacted copy of the submission documents is not provided in the Bid Response Packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.						
COMBINDED CERTIFICATIONS FORM						
Prospective Contractor has included, in this <i>Bid Response Packet</i> , the signed Attachment H - Combined Certifications for Contracting with the State of Arkansas.						
An official authorized to bind the Prospective Contractor to a resultant contract must sign below. The signature below signifies agreement that any exception that conflicts with a Requirement of this Bid Solicitation will cause the Prospective Contractor's bid to be disqualified:						

Authorized Signature:	Title	:
Printed/Typed Name:	Date	

SECTIONS 1 - 4 VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-MANDATORY</u> **must** be declared below or as an attachment to this page. Vendor must clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements shall cause Vendor's proposal to be disqualified.

By signature below, Vendor agrees to and shall fully comply with all requirements as shown in the bid solicitation.

Vendor Name:	D	Date:	
Signature:	Т	Title:	
Printed 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:

Subcontractor's Company Name	Street Address	City, State, ZIP

□ PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE 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
Desha			
Grant			

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)