

ATTACHMENT A APPLICATION PACKAGE CHECKLIST RFP 3172

NOTE: This completed form **MUST** be signed and attached to the front of your application package.

Bid Facility Name:		Bid Unit #:	Date:
Legal Name of Bidder:			
Primary Contact:		Title:	Company:
Email:		Phone:	Fax:
Address:	City:	State or Province:	Zip:
Checklist: Please submit one signed original of the following:			
<input type="checkbox"/> Application Package Checklist (Attachment A) <input type="checkbox"/> Disclosure of Prior Findings of Non-Responsibility Form (Attachment B) <input type="checkbox"/> Project Schedule Form (Attachment C) <input type="checkbox"/> Bid Proposal Form (Attachment D)			
THE BIDDER MUST ANSWER THE FOLLOWING QUESTIONS:			
Do you accept all terms and conditions in the Sample Agreement? (if no, explain on separate pg.)		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been indicted/convicted for a felony with the past 5 years? (if yes, explain on separate pg.)		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a Minority or Women-Owned Business Enterprise?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your proposal contain Minority or Women-Owned Business enterprises as subcontractors?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is other public funding pending/awarded on this and/or similar topic (prior and/or) competing proposals? (if yes, explain on a separate pg.)		<input type="checkbox"/> Yes	<input type="checkbox"/> No
AUTHORIZED SIGNATURE			
I hereby certify that all of the statements and representations made in this Application Package are true to the best of my knowledge and belief, and agree to be bound by the representations, terms, and conditions contained in RFP 3172. I affirm that I understand and will comply with §139-j(3) of the State Finance Law. I understand that this proposal may be disqualified if the solicitation requirements are not met. I the undersigned am an Officer or otherwise authorized representative of the above-noted Bidder and hereby submit this Application Package on Behalf of the Bidder.			
Signature:			
Name:		Date:	
Title:		Phone:	
Organization:		Email:	