



**ATTACHMENT A
PROPOSAL CHECKLIST (MANDATORY)**

RFP 3267

Proposal Title		Due Date	
Primary Contact (Prime Contractor)		Title	
Company		Phone	Fax
		e-mail	
<input type="checkbox"/> By checking this box I certify that the TIN number submitted is not a social security number. If your tax id number is your social security number please leave information blank and contact NYSERDA.			Federal Tax Identification Number:
Address	City	State or Province	Zip
Secondary Contact		Title	
Company		Phone	Fax
		e-mail	
Address	City	State or Province	Zip
THE PRIME CONTRACTOR MUST SIGN THIS FORM BELOW and ANSWER THE FOLLOWING QUESTIONS:			
Do you accept all Terms & Conditions in the Sample Agreement? (If no, explain on separate page)			
(NYSERDA may or may not accept any of the listed exceptions; NYSERDA reserves the right to limit any negotiations to exceptions specifically identified herein.)			Yes No
Do you wish to have any information submitted in your proposal package treated as proprietary or confidential trade secret information? If yes, you must identify and label on each applicable page "confidential" or "proprietary" (For additional information regarding this, please refer to the section entitled "Proprietary Information" in the solicitation document).			Yes No
Have you been indicted/convicted for a felony within the past 5 years? (if yes, explain on separate pg.)			Yes No
Are you a Minority or Women-Owned Business Enterprise?			Yes No
Does your proposal contain Minority or Women-Owned Business enterprises as subcontractor?			Yes No
Are you a certified Service-Disabled Veteran-Owned Business Enterprise?			Yes No
Does your proposal contain certified Service-Disabled Veteran-Owned Business Enterprises as Subcontractors?			Yes No
Are you submitting the required number of copies? (See proposal instructions.)			Yes No
Is other public funding pending/awarded on this and/or very similar topic (prior and/or competing proposals)? (if yes, explain on separate page)			Yes No
ON WHAT PAGE IN YOUR PROPOSAL CAN THESE ITEMS BE FOUND?			
Statement of Qualifications_____	Indictment/Conviction of Felony_____ (if applicable)		
Resume/Curricula Vitae_____	NYSERDA Contracts Awarded_____ (if applicable)		
Cost Proposal_____	Prior and/or Competing Proposals_____ (if applicable)		
Proposed Task List/Scope of Work_____	Exceptions to Terms & Conditions_____ (if applicable)		
References and Letters/Statements of Support_____	Completed and Signed Contract Pricing Proposal Form(s)_____		
	Disclosure of Prior Findings of Non-responsibility Form_____		
AUTHORIZED SIGNATURE & CERTIFICATION			
I certify that the above information, and all information submitted in connection with State Finance Law §139-j and §139-k, is complete, true, and accurate, that I have read and reviewed the Standard Terms and Conditions set forth in the attached Sample Agreement and that I accept all terms unless otherwise noted herein, and that the proposal requirements noted have been completed and are enclosed. I affirm that I understand and will comply with NYSERDA's procedures under §139-j(3) and §139-j(6)(b) of the State Finance Law. I understand that this proposal may be disqualified if the solicitation requirements are not met. I, the undersigned, am authorized to commit my organization to this proposal.			
Signature	Name		
Title	Organization		
Phone			

NOTE: This completed form **MUST** be signed and attached to the front of all copies of your proposal.