Proposal Response Sheet

Shelby County Government – SBI-000346 Parking Lot Paving Project

| Name of firm: | |
|--|--|
| Firm's Website: | - |
| Mailing Address: | Remit Address: |
| Phone: | Phone: |
| Fax: | Fax: Payment Terms: |
| Authorized Representative: | Print: |
| Signature (Person authorized to negotiate with the Cou Email address: | nty on behalf of the organization/firm.) |
| Authorized Representative: | Print: |
| Signature (Person authorized to negotiate with the Cou Email address: | nty on behalf of the organization/firm.) |
| (ii) all declarations in the proposal and attacht (iii) all aspects of the proposal, including cost with any other prospective Proposer or competito (iv) the offer made in the proposal is firm a County; and | prized to submit proposals on behalf of the organization/firm; ments are true to the best of reasonable knowledge; t, have been determined independently, without consultation r for the purpose of restricting competition; nd binding for 90 days after receipt of the proposal by the l submitted are binding for the duration if this proposal is |
| Vendor #(<u>Required</u>) EOC #: If EOC certification was obtained through a Teaming a complete the next page. If this does not apply, disregard | greement and the EOC number starts with a "T", please |
| Check here if you qualify as a MBE, HBE Business Enterprise) If so, please indicate the classificati African American Hispanic American American Native | |

_____ Check here if you are a qualified LOSB (Locally owned Small Business) vendor. Certification for this status is received through the EOC Administration. *This is not a self-certifying classification*.

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Are you currently in an EOC Teaming Agreement? If so please complete the following:

Please name the firm you agreed to team with in order to be qualified to do business with Shelby

County Government:

You are aware that part of being approved with a "Teaming Agreement" you agreed to team with the certified LOSB identified on your agreement on "ALL" County projects?_____

Will this company participate in the completion of services for this proposal?_____

If not, why?_____

If you answered no to the above question, is your Teaming LOSB vendor aware that you are bidding on this project for the County?_____

Have you included another firm to participate in the completion of the services:

If so, who?_____

(Include the complete business name, address, phone and contact person)

Are they a certified LOSB with Shelby County?_____ Include LOSB#_____

Please note that all of the information contained on this page will be used during the evaluation of the responses

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The first page of this document <u>MUST</u> be printed on your company letterhead or stationary.

Definitions for the information listed on the first page

Locally Owned Small Business:

For this purpose, a Locally Owned Small Business is defined as a sole proprietorship, corporation, partnership, joint venture or any other business or professional entity located within Shelby County, Tennessee and at least 51% owned, operated and managed by a Shelby County resident with gross annual sales of \$5 Million dollars or less. The business must be confined within the boundaries of Shelby County, Tennessee

Minority/Hispanic/Woman owned Business Enterprise:

Minority – a Black American having his or her origin in the black racial groups of Africa. Hispanic – A person of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture.

Response Checklist:

Please make sure that basic information listed below is provided in your RFP before you submit your response.

Cover Sheet/Proposal Response Sheet (Required)
 Comprehensive Response to Minimum Requirements & Required Services
 Cost & Fees
 Experience of Respondent
 References
 Additional Information (optional)

(This checklist does not absolve the Respondent of any other required documentation indicated in

the document not list above. Please use the information highlighted above as a reference only)