BID RESPONSE PACKET

710-23-0005

BID SIGNATURE PAGE

Type or Print the following information.

Type of Trine are	PROSPECI	TIVE CONTR	ACTOR'S INFORM	ATION			
Company:	1 11001 201	1112 0011111	AOTOR O IIII ORIII	Allon			
Address:							
			Ctata		7in Cada	<u> </u>	
City:			State:		Zip Code:		
Business Designation:	☐ Individual ☐ Partnership		le Proprietorship ☐ Public Service Corp ☐ Nonprofit				
Minority and	☐ Not Applicable ☐ American Indian ☐ Service Disabled Veteran						
Women-Owned	☐ African American ☐ Hispanic American ☐ Women-Owned						
Designation*:	☐ Asian American	American Pacific Islander American					
	AR Certification #:		* See Minority	and Wome	en-Owned B	usiness Policy	
PROSPECTIVE CONTRACTOR CONTACT INFORMATION Provide contact information to be used for bid solicitation related matters.							
Contact Person:			Title:				
Phone:			Alternate Phone:				
Email:							
	CONF	IRMATION C	F REDACTED CO	PY			
submission de Note:If a redacte packet, and data (other	ed copy of submission do ocuments will be released ed copy of the submission d neither box is checked, than pricing), will be releation Act (FOIA). See Bid	d if requested a documents a copy of the eased in response	i. is not provided with non-redacted docu onse to any request	Prospecti Iments, wi made und	ve Contracto	or's response tion of financia	
	ILLEG	AL IMMIGRA	ANT CONFIRMATION	ON			
they do not emp	submitting a response to to loy or contract with illegal or contract with illegal imn	l immigrants.	If selected, the Pro	spective C	Contractor ce		
	ISRAEL BO	YCOTT RES	TRICTION CONFIR	MATION			
	box below, a Prospective boycott Israel during the			that they o	do not boyco	tt Israel, and i	
☐ Prospective C	Contractor does not and w	vill not boycot	t Israel.				
An official autho	rized to bind the Prosp	ective Contr	actor to a resultan	t contract	t must sign	below.	
	ow signifies agreement thause the Prospective Co				irement of th	nis <i>Bid</i>	
Authorized Signature: Title:							
Printed/Typed Na	ame:		Date:				

SECTIONS 1 - 4 VENDOR AGREEMENT AND COMPLIANCE

Exceptions to Requirements shall cause the vendor's p	roposal to be disqualified.	
By signature below, vendor agrees to and shall fully comp	y with all requirements as shown in the bid solicitation	on.
Vendor Name:	Date:	
Signature:	Title:	
Printed Name:		
L I		

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 U	SE
SUBCONTRACTORS TO PERFORM SERVICES.	

DOCUMENTATION CHECKLIST

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

- Official Documentation of active registration from Arkansas Secretary of State's Office
- Copy of current license
- Three (3) references of previous or present employment from the past five (5) years (Refer to 2.3 for additional requirements)
- Official Bid Price Sheet
- All documents provided in the bid response packet
- EO 98-04 Disclosure Form (Attachment A)
- Equal Opportunity Policy
- Signed addenda, if applicable