

---

## Attachment B

### Proposer Form

#### **PROPOSER INFORMATION**

Check here if Proposer is a Team/Joint Venture

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Contact person, title, telephone and fax number \_\_\_\_\_

---

#### **PROPOSER'S REPRESENTATIONS**

Proposer understands, agrees, and warrants<sup>1</sup>:

1. That Proposer has carefully read and fully understands the information that was provided by the City to serve as the basis for submission of this proposal.
2. That Proposer has the capability to successfully undertake and complete the responsibilities and obligations of the proposal being submitted.
3. That all information contained in the proposal is true and correct to the best of Proposer's knowledge.
4. That Proposer did not, in any way, collude, conspire or agree, directly or indirectly, with any person, firm, corporation or other Proposer in regard to the amount, terms, or conditions of this proposal.
5. That Proposer did not receive unauthorized information from: Any City staff member, or Consultant during the Proposal period except as provided for in the Request for Proposals package, addenda thereto, or the pre-proposal conference.

---

<sup>1</sup> If Proposer is a team or joint venture, these representations are deemed to have been made jointly and severally by each member of the team or joint venture.

- 
6. That by submission of this proposal, the Proposer acknowledges that the City has the right to make any inquiry it deems appropriate to substantiate or supplement information supplied by Proposer, and Proposer hereby grants the City permission to make said inquiries, and to provide any and all requested documentation in a timely manner.

**PROPOSER'S SIGNATURE**

No Proposal shall be accepted which has not been signed in ink in the appropriate space below:<sup>1</sup>

By signing below, the submission of a proposal shall be deemed a representation and certification by the Proposer that they have investigated all aspects of the RFP, that they are aware of the applicable facts pertaining to the RFP process, its procedures and requirements, and that they have read and understand the RFP.

1. If Proposer is an INDIVIDUAL, sign here (include a notarized affidavit attesting to the authenticity of said signature):

Date: \_\_\_\_\_  
\_\_\_\_\_ Proposer's Signature

Date: \_\_\_\_\_  
\_\_\_\_\_ Proposer's Typed Name and Title

\_\_\_\_\_

---

2. If Proposer is a PARTNERSHIP, at least two (2) Partners shall sign here (include a notarized affidavit attesting to the authenticity of said signatures):

---

Partnership Name (type or print)

Date: \_\_\_\_\_ By: \_\_\_\_\_  
Member of the Partnership  
(Signature)

Date: \_\_\_\_\_ By: \_\_\_\_\_  
Member of the Partnership  
(Signature)

Date: \_\_\_\_\_ By: \_\_\_\_\_  
Member of the Partnership  
(Signature)

Date: \_\_\_\_\_ By: \_\_\_\_\_  
Member of the Partnership  
(Signature)

---

3. If Proposer is a TEAM or JOINT VENTURE, an authorized representative of each member of the TEAM or JOINT VENTURE shall sign here (include a notarized affidavit attesting to the authenticity of said signatures):

Joint Venture or Team Member: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Joint Venture or Team Member: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Joint Venture or Team Member: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Joint Venture or Team Member: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

---

4. If Proposer is a CORPORATION, the duly authorized officer(s) shall sign as follows:  
The undersigned certify that they are respectively:

and

---

Title

---

Title

of the corporation named below; that they are designated to sign this Proposer Form by resolution (attach a certified copy, with corporate seal, if applicable, notarized as to its authenticity or Secretary's certificate of authorization) for and on behalf of the below named CORPORATION, and that they are authorized to execute same for and on behalf of said CORPORATION.

---

Corporation Name (type or print)

By:

Date:

Title:

By:

Date:

Title:

---

If the Proposer is a Joint Venture, provide information for each entity comprising the Joint Venture. Use additional pages if necessary to identify all Joint Venture members.

---

Team/Joint Venture Member 1

Identify Percent Contribution of Member 1 \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Contact person, title, telephone and fax number \_\_\_\_\_

- Member 1 is a:
- |  |  |
|--|--|
| <input type="checkbox"/> Corporation   | <input type="checkbox"/> Partnership         |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Sole Proprietorship |

---

Team/Joint Venture Member 2

Identify Percent Contribution of Member 2 \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Contact person, title, telephone and fax number \_\_\_\_\_

- Member 2 is a:
- |  |  |
|--|--|
| <input type="checkbox"/> Corporation   | <input type="checkbox"/> Partnership         |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Sole Proprietorship |

---

Team/Joint Venture Member 3

Identify Percent Contribution of Member 3 \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Contact person, title, telephone and fax number \_\_\_\_\_

- Member 3 is a:
- |  |  |
|--|--|
| <input type="checkbox"/> Corporation   | <input type="checkbox"/> Partnership         |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Sole Proprietorship |

---

Team/Joint Venture Member 4

Identify Percent Contribution of Member 4 \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

Contact person, title, telephone and fax number \_\_\_\_\_

- Member 4 is a:
- |  |  |
|--|--|
| <input type="checkbox"/> Corporation   | <input type="checkbox"/> Partnership         |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Sole Proprietorship |