

ATTACHMENT B Firm Information

Firm Name _____

My firm is proposing to perform work for the Council's project as: ☐ the prime firm. ☐ a subcontractor. ☐ a joint venture partner.

If your firm is proposing to perform work as a subcontractor or joint venture partner, provide the name of the prime firm / other partner:

A responding firm must provide in its submittal a fully completed Attachment B - Firm Information for itself and for **each** of its subcontractors / joint venture partners. This Attachment B includes the following forms:

- (1) Corporate Profile
- (2) Statement of Past Performance
- (3) Firm Responsibility Certification

Each form in this Attachment B must be completed in its entirety. Please type the information into the forms using Adobe Reader or other compatible Adobe product. The forms in this Attachment B contain rules, which means that many of the boxes / spaces will auto fill depending on your answers to the questions. If you have any issues with the forms please contact the Council's staff person designated in Section IX, Part A of the solicitation documents.

You are NOT permitted to substitute your own format or information for the forms included in this Attachment B.

If you need additional space to provide the information requested in this Attachment B, please use the form titled "Additional Information."

An authorized representative of your firm **must sign and date** the certification provided on Forms #2 and #3. **A typed signature is not acceptable.** The Council will use the information contained in this Attachment B during the evaluation and selection process. For additional information, refer to Section IV of the solicitation documents.

The Council may contact your firm to obtain additional information based on your firm's answers to the questions on this Attachment B.

If your firm is selected for a contract award, your firm and each of its subcontractors / joint venture partners may be required to complete, sign, and return the *Firm Responsibility Information - Detailed Questionnaire*, so that the Council can make a firm responsibility determination in accordance with Section IV, Part F of the solicitation documents. A copy of this questionnaire is provided in Appendix 4 of the solicitation documents.

Your firm should be aware that the Council may deem your firm's submittal non-responsive and reject the submittal for:

- (1) Failure to sign both Attachment B, Forms #2 and #3,**
- (2) Failure to provide all of the information requested in this Attachment B,**
- (3) Failure to provide a signed Attachment B for each subcontractor / joint venture partner, or**
- (4) Failure to provide sufficient information for the Council to make an initial responsibility determination.**

The Council reserves the right to waive minor errors, omissions, or technicalities in this Attachment B as determined to be in the best interest of the Council.

#1 - Corporate Profile

Your firm must provide the information requested below about its corporate structure, history, etc. If you need additional space to provide the information use the form titled "Additional Information."

A. Firm Information

Firm Name _____

Business Address (Street, City, State & Zip) _____

Provide a brief description of your firm's core business (e.g. the types of services provided, the types of clients served).

B. Corporate Formation

In which State was your firm organized or incorporated? _____ Is your firm ☐ a public company? ☐ a private company?

Type of Ownership _____ Year Established / Incorporated _____

Does your firm have a former name / year established? ☐ Yes ☐ No Does your firm have a parent company or a subsidiary? ☐ Yes ☐ No

If your firm has a former name / year established, a parent company, or a subsidiary, in the space provided below, please describe your firm's former name, year established, parent company name and location, or subsidiary name and location, as applicable.

C. FEIN / U.S. System for Award Management (SAM) Registration

FEIN _____ Is your firm registered with SAM? ☐ Yes ☐ No If registered with SAM, provide your firm's CAGE Code: _____

D. Business Registration

Is your firm registered to do business in Missouri? ☐ Yes ☐ No Is your firm registered to do business in Illinois? ☐ Yes ☐ No ☐ N/A

Firms must be properly registered to do business prior to beginning work for the project. If the IL business registration "N/A" box is checked, then only a MO business registration is required for the project.

#2 - Statement of Past Performance (pg. 1 of 2)

Firm Name _____

The following questions ask your firm to provide information about its past performance on the Council's projects, projects for other governmental entities, or in general. Your firm must indicate whether or not it has successfully completed past projects.

As described in Section IV of the solicitation documents, the Council will evaluate a responsive firm's past performance. As part of this evaluation, the Council will review the answers your firm provides on this Attachment B, Form #2 - Statement of Past Performance.

Your firm must answer each of the questions below and an authorized representative of your firm **must sign and date** the form. **A typed signature is not acceptable.**

The Council reserves the right to request additional information from your firm regarding the answers to the questions below.

A. Council Projects

1. Is your firm currently delinquent or past due on any monies owed to the Council? ☐ Yes ☐ No
2. In the previous 3 years, has your firm performed work for the Council? ☐ Yes ☐ No
 - (a) If "Yes," answer each of the following questions.
 - (i) How many projects has your firm completed for the Council in the previous 3 years? _____
 - (ii) Did your firm meet each project deadline, milestone, etc.? ☐ Yes ☐ No ☐ N/A
 - (iii) Did your firm complete each project on time? ☐ Yes ☐ No ☐ N/A
 - (iv) Did your firm complete each project within budget? ☐ Yes ☐ No ☐ N/A
 - (v) Did your firm have issues with client communication, community outreach, or similar? ☐ Yes ☐ No ☐ N/A
 - (vi) Did your firm receive any complaints from the Council regarding quality of work products? ☐ Yes ☐ No ☐ N/A
 - (vii) Were any of your firm's contracts terminated for any performance issues? ☐ Yes ☐ No ☐ N/A
 - (viii) Is your firm currently in breach or default of a Council contract? ☐ Yes ☐ No ☐ N/A

Firms that owe the Council monies or that are currently in breach or default of a Council contract may be deemed ineligible for a contract award.

B. Other Governmental Entity Projects

1. In the previous 3 years, has your firm performed work for any local, state, or federal governmental entity? ☐ Yes ☐ No
 - (a) If "Yes," answer each of the following questions.
 - (i) How many projects has your firm completed for a governmental entity in the previous 3 years? _____
 - (ii) Did your firm meet each project deadline, milestone, etc.? ☐ Yes ☐ No ☐ N/A
 - (iii) Did your firm complete each project on time? ☐ Yes ☐ No ☐ N/A
 - (iv) Did your firm complete each project within budget? ☐ Yes ☐ No ☐ N/A
 - (v) Did your firm have issues with client communication, community outreach, or similar? ☐ Yes ☐ No ☐ N/A
 - (vi) Did your firm receive any complaints from the entity regarding quality of work products? ☐ Yes ☐ No ☐ N/A
 - (vii) Were any of your firm's contracts terminated for any performance issues? ☐ Yes ☐ No ☐ N/A
 - (viii) Is your firm currently in breach or default of a contract with a governmental entity based upon a failure to perform? ☐ Yes ☐ No ☐ N/A
 - (ix) Provide the name of the **3 most recent and relevant** projects identified in sub-part (B)(1)(a)(i) and the name of the governmental entity.

#2 - Statement of Past Performance (pg. 2 of 2)

Firm Name _____

C. Other Projects

1. If your firm has **not** performed work for the Council or any local, state, or federal entity, answer the following questions with respect to your firm's projects that were completed within the previous 3 years and that are similar in size and scope to the Council's project.

- | | | | |
|--|------------------------------|-----------------------------|------------------------------|
| (a) Did your firm meet each project deadline, milestone, etc.? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (b) Did your firm complete each project on time? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (c) Did your firm complete each project within budget? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (d) Did your firm have issues with client communication, community outreach, or similar? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (e) Did your firm receive any complaints from the client regarding quality of work products? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (f) Were any of your firm's contracts terminated for any performance issues? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| (g) Is your firm currently in breach or default of a contract with a client based upon a failure to perform? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

(h) Provide the name of **3 most recent and relevant** projects completed by your firm and the name of the client.

D. All Projects

1. In the previous 3 years, has your firm ever had a client (e.g. person / entity contracting with your firm) that:

- | | | |
|---|------------------------------|-----------------------------|
| (a) sued to compel performance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) sued to recover damages based upon the alleged failure of your firm to perform as required by the contract? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) called upon a surety to perform the work? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Please provide any additional information that explains any performance issues or any other information that you believe will help the Council evaluate your firm's past performance. If you need more space, use the form titled "Additional Information."

CERTIFICATION

By signing below, I certify that I am authorized to sign this Statement of Past Performance on behalf of my firm and that the information contained on this form is accurate and complete to the best of my knowledge.

Name & Title of Authorized Official _____

Signature of Authorized Official _____

Date _____

#3 - Firm Responsibility Certification (pg. 1 of 2)

Firm Name _____

As described in Section IV, Part A, Sub-Part 2 of the solicitation documents, the Council will not award a contract for the project to a firm that the Council's determines is not responsible. For each responsive submittal, the Council will conduct an initial review of the firm's responsibility. As part of this initial responsibility determination, the Council will review the answers your firm provides in its submittal and on this Attachment B, Form #3 - Firm Responsibility Certification. More information regarding the Council's responsibility determination can be found in Section IV, Part A, Sub-Part 2 of the solicitation documents.

Your firm must answer each of the questions below and an authorized representative of your firm **must sign and date** the certification. **A typed signature is not acceptable.**

If your firm is selected for a contract award, your firm, and each of its subcontractors / joint venture partners may be required to complete, sign, and return the *Firm Responsibility Information - Detailed Questionnaire*, so that the Council can make a firm responsibility determination in accordance with Section IV, Part F of the solicitation documents. A copy of this questionnaire is provided in Appendix 4 to the solicitation documents. A firm selected for a contract award for this project (including subcontractors / joint venture partners) may be deemed not responsible or ineligible for contract award if the firm fails to complete the questionnaire, as requested, or if the firm's questionnaire reveals any unexplained, material misstatements on this Attachment B, Form #3 - Firm Responsibility Certification.

The Council reserves the right to request additional information from your firm regarding the answers to the questions below.

1. Did you review the Firm Responsibility Questionnaire provided in Appendix 4 to the solicitation documents? ☐ Yes ☐ No
2. Based on your review of the Firm Responsibility Questionnaire, does your firm have any issues or deficiencies that may lead the Council to making a finding of non-responsibility? ☐ Yes ☐ No
If "Yes," use the form titled "Additional Information" to disclose the issues or deficiencies.
3. Is your firm able and willing to provide the documentation necessary to demonstrate that it has, or has the ability to obtain, the financial, technical, and administrative capacity and resources to successfully complete the Council's project within the estimated performance period? ☐ Yes ☐ No
If "No," use the form titled "Additional Information" to explain.
4. Does your firm's insurance coverage meet the minimum requirements described in the *Draft Contract Terms & Conditions, Paragraph 5*? ☐ Yes ☐ No
If "No," use the form titled "Additional Information" to explain.
5. Based on your review of the Council's Conflicts of Interest Policy and the Conflicts of Interest Questionnaire & Disclosure Statement (see Appendix 3), will your firm need to disclose:
 - (a) a conflict of interest with respect to this procurement action (e.g. access to non-public information that provides or may appear to provide your firm with an unfair competitive advantage)? ☐ Yes ☐ No
 - (b) a conflict of interest with respect to the contract that will be awarded for this project (e.g. an interest that will impair or may appear to impair your firm's ability to objectively perform work for the Council's project)? ☐ Yes ☐ No*If "Yes," use the form titled "Additional Information" to briefly describe the nature of the conflict. If selected for a contract award, your firm will be required to fully disclose any conflict on the Conflicts of Interest Questionnaire & Disclosure Statement.*

#3 - Firm Responsibility Certification (pg. 2 of 2)

Firm Name _____

6. Within the previous 3 years has your firm, any affiliate, any predecessor company or entity, owner, director, officer, partner, principal, or proprietor been subject to any of the following:
- | | | |
|---|------------------------------|-----------------------------|
| (a) a government suspension or debarment? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) a governmental entity's rejection (including pending actions) of any bid or disapproval of any proposed subcontract for lack of responsibility? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) a governmental entity's denial or revocation of prequalification? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) a voluntary exclusion agreement? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) a finding of non-responsibility for any reason by a federal or state governmental entity / agency? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (f) had one or more public transactions (federal, state, or local) terminated for cause or default? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (g) an indictment for, or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) for, fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (h) a civil judgment rendered against it for commission of any of the offenses enumerated in Question 6, Part (g)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (i) a conviction of the commission of any of the offenses enumerated in Question 6, Part (g)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (j) a grant of immunity with respect to the commission of any of the offenses enumerated in Question 6, Part (g)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If "Yes" to any of (a) through (j), use the form titled "Additional Information" to explain.

7. Is your firm, any affiliate, any predecessor company or entity, owner, director, officer, partner, principal, or proprietor currently subject to any pending actions as enumerated in Question 6, Parts (a) through (j)?
- ☐ Yes ☐ No

If "Yes," use the form titled "Additional Information" to explain.

CERTIFICATION

By signing below, I certify that I am authorized to sign this Firm Responsibility Certification on behalf of my firm and that the information contained on this form is accurate and complete to the best of my knowledge.

Name & Title of Authorized Official _____

Signature of Authorized Official _____

Date _____

ATTACHMENT B Firm Information



Additional Information

Use this form to provide any information that you either could not provide on Forms #1 - 3 or that explains any of the answers you provided on Form #3. You may attach as many of these sheets that you need to provide the requested information.

Please make sure that you indicate the form and question for which you are providing additional information (i.e. Form #3, Box #2; Form #1, Former Firm Names, etc.)

Firm Name _____