

MAINE DEPARTMENT OF TRANSPORTATION
Contract Procurement Office (CPO)
APPENDIX A — FIRM'S GENERAL INFORMATION FORM
RFQ # _____

This form must be completed in its entirety and submitted as part of the Technical Submission Package.

1. CONTACT INFORMATION

A. Firm's Name _____ _____	B. Firm's Contact (First & Last Name) _____ _____	C. Firm's Contact Title _____ _____
D. Firm's Contact E-mail Address _____ _____	E. Firm's Contact Office Phone No. _____ _____	F. Firm's Contact Cell Phone No. _____ _____
G. Firm's Web Address _____ _____	H. Firm's President / Managing Officer _____ _____	

2. CORPORATE INFORMATION

A. Entity Type — select all that apply: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Minority Owned <input type="checkbox"/> Woman Owned <input type="checkbox"/> Small Business <input type="checkbox"/> S Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation (State: _____) <input type="checkbox"/> Other: _____ _____	B. Firm's UEI Number _____ _____ C. Firm's Federal EIN _____ _____ D. Firm's State of Maine Vendor/Customer No.: <input type="checkbox"/> VC _____ <input type="checkbox"/> VS _____	E. Audited Overhead Report dated within last two (2) years? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of most recent report: _____ _____
F. Is your firm a Disadvantaged Business Enterprise (DBE)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, certified by MaineDOT Civil Rights Office? <input type="checkbox"/> Yes <input type="checkbox"/> No	G. Is your firm's Corporate Headquarters located in Maine? <input type="checkbox"/> Yes <input type="checkbox"/> No Firm's Corporate Headquarters physical address: _____ _____ _____	

3. AFFIRMATIVE ACTION

A. Does your firm have a current Equal Employment Opportunity policy and plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	B. Is your firm aware of Equal Employment Opportunity (EEO) responsibilities? <input type="checkbox"/> Yes <input type="checkbox"/> No	C. Is your firm aware of MaineDOT's goals for utilization of DBE firms? <input type="checkbox"/> Yes <input type="checkbox"/> No
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4. CERTIFICATION

By submittal of this form, I certify to the best of my knowledge and belief that the firm, its principals, and all subcontractors (if any) named in the Technical Submission Package:

A. Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from bidding or working on contracts issued by any governmental agency.
B. Have not, within three years of submitting the proposal for this contract, been convicted of, or had a civil judgment rendered against them for: (1) Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or contract; or (2) Violating Federal or State antitrust statutes or committing embezzlement, theft, forgery, bribery, falsification and/or destruction of records, making false statements, or receiving stolen property.
C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or Local) with commission of any of the offenses enumerated in paragraph (B) of this certification.
D. Have not, within a three-year period preceding this proposal, had one or more Federal, State, or Local government transactions terminated for cause or default.

<input type="checkbox"/> By submittal of this form, I certify to the best of my knowledge and belief the statements A–D above.
<input type="checkbox"/> By submittal of this form, I certify that I have thoroughly read and understand all information contained in the RFQ, including all amendments, addendums, and responses to submitted questions.
<input type="checkbox"/> By submittal of this form, I certify that I have reviewed the firm's Technical Submission Package to ensure all required documents are included.
<input type="checkbox"/> By submittal of this form, I certify that all information contained in the firm's Technical Submission Package is true and accurate and that I am an Authorized Signatory Officer of the Firm.
<input type="checkbox"/> By submittal of this form, I certify that the typed name (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, (d) is under the sole control of myself, (e) is linked to data in such a manner that it is invalidated if the data are changed. (10 M.R.S.A. §9501 et seq.)

A. Typed Name of Submitting Authorized Officer <hr/>	B. Title <hr/>	C. Date <hr/>
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Submit this form as part of your complete Technical Submission Package per the RFQ instructions.

Maine DOT Contract Procurement Office | 16 State House Station, Augusta, ME 04333-0016 | CPO.MaineDOT@maine.gov | 207-624-3337