# ARLINGTON COUNTY, VIRGINIA REQUEST FOR PROPOSALS NO. 23-FIR-RFP-304

#### PROPOSAL FORM

ELECTRONIC PROPOSALS WILL BE RECEIVED BY THE COUNTY VIA VENDOR REGISTRY NOT LATER THAN 3:00 P.M., NOVEMBER 30, 2022.

#### FOR PROVIDING

# FIRE PREVENTION OFFICE SOFTWARE SOLUTIONS RELATED TO FIRE PREVENTION, CODE ENFORCEMENT AND COMMERCIAL SYSTEMS TESTING SOFTWARE AND SUPPORT PER THE SOLICITATION.

THE FULL <u>LEGAL NAME</u> OF THE ENTITY SUBMITTING THIS PROPOSAL MUST BE WRITTEN IN THE SPACE BELOW. THIS PROPOSAL FORM AND ALL OTHER DOCUMENTS THAT REQUIRE A SIGNATURE MUST BE FULLY AND ACCURATELY COMPLETED AND SIGNED BY A PERSON WHO IS AUTHORIZED TO BIND THE OFFEROR, OR THE PROPOSAL MAY BE REJECTED.

SUBMITTED BY: (legal name of entity)		
AUTHORIZED SIGNATU	RE:	
PRINT NAME AND TITL	E:	
ADDRESS:		
CITY/STATE/ZIP:		
TELEPHONE NO.:	E-MAIL ADDRESS:	
THIS ENTITY IS INCORPIN:	ORATED	
THIS ENTITY IS A: (check the applicable	CORPORATION  LIMITED PARTNERSHIP	
option)	GENERAL PARTNERSHIP   UNINCORPORATED ASSOCIATION	
	LIMITED LIABILITY COMPANY   SOLE PROPRIETORSHIP	
COMMONWEALTH OF	VIRGINIA?  SSUED TO THE ENTITY BY THE	

Any Offeror exempt from Virginia State Corporation Commission (SCC) authorization requirement must

include a statement with its proposal explaining why it is not required to be so authorized.

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ENTITY'S DUN & BRADSTREET D-U-N-S NUMBER: (if available)			
HAS YOUR FIRM OR ANY OF ITS PRINCIPALS BEEN DEBARRED, ENJOINED, OR SUSPENDED FROM SUBMITTING PROPOSALS TO ARLINGTON COUNTY, VIRGINIA, OR ANY OTHER STATE OR POLITICAL SUBDIVISION WITHIN THE PAST THREE YEARS?			
OFFEROR STATUS: MINORITY OWNED: ☐ WOMAN OWNED: ☐ NEITHER: ☐	<b></b>		
THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLOWING:			
THE OFFICIAL COPY OF THE SOLICITATION DOCUMENTS, WHICH INCLUDES ANY ADDENDA, IS THE ELECTRONIC COPY THAT IS AVAILABLE FROM THE VENDOR REGISTRY WEBSITE.	E		
POTENTIAL OFFERORS ARE RESPONSIBLE FOR DETERMINING THE ACCURACY AND COMPLETENESS OF ALL SOLICITATION DOCUMENTS THEY RECEIVE FROM ANY SOURCE, INCLUDING THE COUNTY.	F		
<ol> <li>OFFEROR MUST SUBMIT: ONE ELECTRONIC COMPLETE SIGNED PROPOSAL THAT INCLUDES AS FIRST PAGE THIS PROPOSAL FORM.</li> <li>INDICATE THE NAME AND CONTACT INFORMATION OF THE PERSON WHO CAN RESPONDENT AUTHORITATIVELY TO QUESTIONS REGARDING THIS PROPOSAL.</li> </ol>			
NAME (PRINTED): TITLE:			
E-MAIL ADDRESS: TEL. NO.:			
TRADE SECRETS OR PROPRIETARY INFORMATION:  Trade secrets or proprietary information submitted by an Offeror in connection with a procurement transaction will not be subject to public disclosure under the Virginia Freedom of Information Act. Pursuant to Section 4-111 of the Arlington County Purchasing Resolution, however, an Offeror seeking to protect submitted data or materials from disclosure must, before or upon submission of the data or materials, identify the data or materials to be protected and state the reasons why protection is necessary.			
Please mark one:			
☐ No, the proposal that I have submitted does <u>not</u> contain any trade secrets and/or proprieta information.	ary		
Yes, the proposal that I have submitted <u>does</u> contain trade secrets and/or proprieta information.	ary		

a	, PAGE 3 OF 6 Yes, you must clearly identify below the exact data or materials to be protected <u>and</u> list lapplicable page numbers, sections, and paragraphs, of the proposal that contain such ata or materials:
	tate the specific reason(s) why protection is necessary and why the identified of the identified of the specific reason and secret or is proprietary:
- - -	
is necessary, you	o identify the data or materials to be protected or to state the reason(s) why protection will not have invoked the protection of Section 4-111 of the Purchasing Resolution the award of a contract, the proposal will be open for public inspection consistent with
affected by (1) an (as defined in Vir	F NON-COLLUSION: The undersigned certifies that this proposal is not the result of or y act of collusion with another person engaged in the same line of business or commerce ginia Code §§ 59.1-68.6 et seq.) or (2) any act of fraud punishable under the Virginia auds Act (Virginia Code §§ 18.2-498.1 et seq.).
Provide the nar communications	N AND MAILING ADDRESS FOR DELIVERY OF NOTICES  ne and address of the person who is designated to receive notices and other regarding this solicitation. Refer to the "Notices" section in the draft Contract Terms and ormation regarding delivery of notices.
NAME:	
ADDRESS	:
E-MAIL:	

OFFEROR'S PRINTED NAME: \_\_\_\_\_

### ACKNOWLEDGEMENT OF COUNTY COVID-19 VACCINATION POLICY

I,(h	ereinafter referred to as "Offeror"), certify that I will
comply with the COVID-19 Vaccination Policy as a	condition of contract award which may require that all
contractor employees or subcontractors who will	be working on the contract are fully vaccinated against
COVID-19, or being tested on a weekly bas	is, or are exempt pursuant to a valid reasonable
accommodation under state or federal law.	
Signed:	Date:
Name of Offeror:	

#### **CONFLICT OF INTEREST STATEMENT**

I, whose name is subscribed below, a duly authorized representative and agent of the entity submitting this proposal to Arlington County in response to its Request for Proposal No. 23-FIR-RFP-304, and on behalf of the Offeror certify that:

- 1. Neither the Offeror nor any affiliated entity has, within the past five years, been employed by or represented a deliverer of services that reasonably could be expected to be considered for purchase by the County as a result of this solicitation.
- if the Offeror is awarded a contract under this solicitation and during the term of that contract
  prepares an invitation to bid or request for proposal for or on behalf of the County, the Offeror
  must not (i) submit a bid or proposal for that procurement or any portion thereof or (ii) disclose
  to any potential bidder or offeror information concerning the procurement that is not available
  to the public.
- 3. The Offeror will not solicit or accept any commissions or fees from vendors who ultimately furnish services to the County as a result of any contract award made as a result of this solicitation.

OFFEROR'S NAME:	
SIGNED BY:	
PRINTED NAME/TITLE:	
DATE:	
NOTARY STATEME	NT
COMMONWEALTH OF VIRGINIA/STATE OF	)
CITY/COUNTY OF	) to wit:
personally a personal persona	y proven) to be the person whose name is
(Seal)	
Notary registration number:	
iviy commission expires.	

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## CERTIFICATION OF MEETING MINIMUM QUALIFICATIONS

l, the foll	(hereinafter referred to as "Offeror"), certify that I meet owing minimum qualifications:
1.	Have successfully implemented a proposed Fire Prevention Office Software Solution(s) in a minimum of three (3) jurisdictions of a similar size and complexity of the Arlington County Fire Department.
2.	Have provided Commercial Systems Testing systems with self-funding fee structures to Fire Department agencies for a jurisdiction similar in size and annual incidents for Arlington County, for a minimum of 3 years.
Signed	: Date:
Name	of Offeror: