PROPOSAL FORM

The firm shall submit on the attached Proposal Form. Include a written response to all questions requested on the Proposal Form.

The additional required documentation must be submitted with the Proposal, including the Financial Statement and Non-Collusion Affidavit.

PROPOSAL FORM FOR FRANKLIN COUNTY PUBLIC SAFETY COMPLEX SIGNAGE

Contact Office Number	Contact Mobile Number
	n the specifications including general
\$(Amount in number fo	rm)
da to the Proposal Documents is ack	nowledged (initial each):
Dated:	Initials:
Dated:	Initials:
	t shall include all work as noted in ad, and profit. \$ (Amount in number fo da to the Proposal Documents is ack Dated:

BASE PROPOSAL (Alternate #1): Amount shall include all work as noted in the specifications including general conditions, allowances, overhead, and profit.

\$_____(Amount in number form)

BASE PROPOSAL (Alternate #2): Amount shall include all work as noted in the specifications including general conditions, allowances, overhead, and profit.

\$____

(Amount in number form)

SCHEDULE

The undersigned firm proposes and agrees hereby to commence the Work of the Contract Documents on a date specified in a written Notice to Proceed to be issued by Owner and shall fully complete the Work within 90 calendar days.

FINANCIAL STATEMENT FOR PROPOSALS

Attachment of Financial Statement is mandatory. Any proposal submitted without said Financial Statement shall thereby be rendered invalid. The Financial Statement provided hereunder to the governing body awarding the contract must be specific enough in detail so that said governing body can make proper determination of the Proposer's capability for completing the project if awarded.

SUBCONTRACTORS LIST

The following Subcontractors List shall be completed and submitted with the firm's proposal. The Owner shall have the right to choose the subcontractor for any particular item where the proposer either fails to list same or lists more than one name for the item in question.

After submission of this list by the firm and after approval of same by the Owner, it shall not be changed unless written approval of said change is authorized by the Owner.

LIST OF PROPOSED SUBCONTRACTORS:

(Must be submitted with proposal)

The following list of proposed subcontractors is required by the owner to be executed, completed, and submitted with the Proposal. All subcontractors are subject to approval by the Franklin County Fiscal Court. Failure to submit this list, completely filled out, may result in proposal rejection.

BRANCH OF WORK NAME AND ADDRESS OF **SUBCONTRACTOR** (If Prime/General, please state.) 1. SITE WORK & EXCAVATION 2. CONCRETE 3. PAVING 4. CAULKING & SEALANTS 5. PLUMBING ELECTRICAL 6. PAINTING 7. 8. INFORMATION TECHNOLOGY 9. 10. 11. 12. 13.

14.

Please provide typed written answers on company letterhead for each of the following questions.

- 1. What sign projects has your organization completed in the past five years? Provide the following:
 - Name, Address, and Phone Number of Owner
 - Contract Amount
 - When Completed
- 2. What projects does your organization now have in progress?
 - Name, Address, and Phone Number of Owner
 - Contract Amount
 - Anticipated Completion Date
- 3. Have you ever failed to complete any work awarded to you? If yes, provide the following for each project:
 - Name, Address, and Phone Number of Owner
 - Contract Amount
 - Reason for Failing to Complete Awarded Work
- 4. List four references from work you have completed in the past five years. Provide the following:
 - Name, Address, and Phone Number
 - Type of Work Completed

<u>AUTHENTICATION OF PROPOSAL AND STATEMENT OF NON-COLLUSION AND NON-CONFLICT OF INTEREST</u>

I HEREBY CERTIFY:

- 1. That I am the proposer (if the proposer is an individual), a partner in the proposer (if the proposer is a partnership), or an officer and employee of the corporation having authority to sign on it's behalf (if the proposer is a corporation);
- 2. That the proposer is legally entitled to enter into the contract with the Owner and is not in violation of any prohibited conflict of interest, including those prohibited by the provisions of KRS 164.390; and 45A.330 to 45A.340 and 45A.455;
- 3. This offer is for <u>thirty (30)</u> calendar days from the date this proposal is opened.
- 4. That I have fully informed myself regarding and affirm the accuracy of all statements made in this Form of Proposal including Amount.

READ CAREFULLY – SIGN IN SPACE BELOW

FEDERAL ID. NO. OR SOCIAL SECURITY NO.:	FIRM:		
	ADDRESS:		
DATE:			
TELEPHONE NO:	CITY	STATE	ZIP CODE
EMAIL:			

NON-COLLUSION AFFIDAVIT

By submission of this proposal, each proposer and each person signing on behalf of any proposer certifies, and in the case of a joint proposal each party hereto certifies as to its own organization, under penalty of perjury, that to the best of knowledge and belief:

- (a) The prices in this proposal have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other proposer or any competitor
- (b) Unless otherwise required by law, the prices which have been quoted in this proposal have not been knowingly disclosed by the proposer and will not knowingly be disclosed by the proposer prior to opening, directly or indirectly, to any other proposer or to any competitor;
- (c) No attempt has been made or will be made by the proposer to insure any other person, partnership, or corporation to submit or not to submit a proposal for the purpose of restricting competition;
- (d) The person signing this proposal or proposal certifies that he has fully informed himself regarding the accuracy of the statements contained in this certification, and under the penalties of perjury, affirms the truth thereof, such penalties being applicable to the proposer as well as to the person signing in its behalf;
- (e) That attached hereto (if corporate proposer) is certified copy of resolution authorizing the execution of this certificate by the signature of this proposal or proposal in behalf of the corporate proposer.

Ind	ivic	lua	l)	

(Corporation)

Date:

By:_____

This Non-Collusion Affidavit must be submitted with the proposal.

COMMONWEALTH OF KENTUCKY FINANCE AND ADMINISTRATION CABINET AFFIDAVIT REGARDING WORKERS' COMPENSATION INSURANCE AND UNEMPLOYMENT INSURANCE

Pursuant to KRS 45A.480, the undersigned hereby swears or affirms, under penalty of perjury, that all contractors and subcontractors employed, or that will be employed, under the provisions of this contract shall be in compliance with the requirements for workers' compensation insurance under KRS Chapter 342 and unemployment insurance under established KRS Chapter 341.

(Signature)				
(Title)				
(Name of Company)				
State of)) SS County of)				
The foregoing statement was acknowledged this day of, 20	and , by	sworn	to	me
(Notary Public)				
My Commission expires:				

PROPOSAL ACCEPTANCE

If written notice of the acceptance of this Proposal is mailed, telegraphed or delivered to the undersigned within the time noted herein, after the date of the opening of Proposals, or at any time thereafter before this proposal is withdrawn, the undersigned agrees to execute an Agreement in accordance with the proposal as accepted, and will furnish Contract security in the form of Performance certificate equal to (100%) of the Contract Amount with such bond companies as the Owner may approve, all within 10 days (unless a longer period is agreed) from the date of such written notice.

It is understood and agreed that the Owner reserves the right to award the Contract to its best interest, to reject any or all proposals, to waive any informalities in the proposal, and to hold all proposals for the proposal guarantee period.

Respectfully submitted,

Legal Name of Corpo	oration		State of Incorporation	
Address			Typed Name of Officer	
City	State	Zip Code	Signature of Officer	
			Title of Officer	
			Date	
			Date	

Notarized

END OF PROPOSAL FORM