



Attachment B – Respondent Questionnaire
Architect Services
RFQ #28-012401AS

SECTION A. GENERAL INFORMATION

1. Company Information: Provide the following information regarding your business (firm, organization or company).

Name/Name of Organization/Company: _____

Address _____

State: _____ Zip Code: _____ Telephone: _____ Fax: _____

Please attach the following information regarding business Organization (Corporation, Partnership, Individual, Joint Venture, Other): (1) the state where chartered; (2) names of all principals (officers, directors, partners, general or managing partners etc.); and (3) if your organization was chartered outside of the state of Texas, a statement regarding whether are you registered to do business in Texas.

2. Contact Information: List the person who the District may contact concerning your proposal or setting dates for meetings.

Name: _____

Address _____

State: _____ Zip Code: _____ Telephone: _____ Fax: _____

3. Does your business anticipate any mergers, transfer of organization ownership, management reorganization, or departure of key personnel within the next twelve (12) months that may affect the organization's ability to carry out its proposal?

Yes D No D

4. Is your business authorized to do business in Texas? Yes

D No D

5. Provide any other names under which your business has operated within the last 5 years.

6. Debarment/Suspension Information: Has the business or any of its principals been debarred or suspended from contracting with any public entity?

Yes D No D

If yes, identify the public entity and the name and current phone number of a representative of the public entity familiar with the debarment or suspension, and state the reason for or circumstances surrounding the debarment or suspension, including but not limited to the period of time for such debarment or suspension.

8. Bankruptcy Information: Have you or the business (under any name) ever been declared bankrupt or filed for protection from creditors under state or federal proceedings?

Yes D No D

If yes, state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.



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9. Default. Have you or the business defaulted and/or been removed from any Project in the last ten (10) years.

Yes No

If yes, state the name and address of the individual or entity with whom the Project was contracted, the name of the Project, the date of removal and the reason for removal.

10. Insurance. The Agreement (RFQ Appendix A-1) which the Respondent will be asked to enter, contains the insurance requirements for these Projects. Only the selected Respondent will be expected to provide Certificates of Insurance; however, for submittal purposes, the Respondent is asked to confirm by its initials below that Respondent is able to meet the insurance requirements as specified in the Agreement attached to the RFQ as RFQ Appendix A-1.

____ Initials of Authorized Respondent.

11. Please provide the name and other information below regarding the Architect, licensed in Texas, who will be leading the team or teams for each of the Projects and an estimate of the number of Projects on which this individual and/or your firm have provided architectural and/or engineering services, including design, assistance with bidding and negotiation, contract and construction administration and project close-out, similar to those requested in the RFQ:

Name: _____

Address: _____

State: __ Zip code: _____ Telephone: _____ Fax: _____

License Number or other License Identifier: _____



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SECTION B -ACKNOWLEDGEMENTS AND CERTIFICATIONS

Respondent shall initial in the column next to the representation to indicate its acknowledgement, agreement and/or certification, as requested.

1	(initial)	Family Code Sec.231.006 Certification. In accordance with Section 231.006 of the Texas Family Code, to the extent applicable to this Agreement, the Proposer certifies that the individual or business entity named in its RFP Proposal submission is not ineligible to receive the payments under a contract entered into as a result of this RFP and acknowledges that any contract entered into as a result its selection under this RFP may be terminated and payment withheld if this certification is inaccurate.
2	(initial)	<u>Certification Regarding Terrorism.</u> Pursuant to Sections 2252.151-.154 of the Texas Government Code, the vendor hereby certifies that it is not a company identified on the Texas Comptroller's list of companies known to have contracts with, or provide supplies or services to, a foreign organization designated as a Foreign Terrorist Organization by the U.S. Secretary of State under federal law.
3	(initial)	Certification <u>Regarding</u> Israel. Pursuant to Texas Government Code Chapter 2271, if this contract is valued at \$100,000 or more and if the Contractor has at least ten (10) full time employees, then the Contractor, by its execution of this Agreement represents and warrants to the Owner that the Contractor does not boycott Israel and will not boycott Israel during the term of this Agreement. This section does not apply to a sole proprietorship
4	(initial)	Pursuant to Subchapter J, Chapter 552, Texas Government Code, the Proposer hereby certifies and agrees to (1) preserve all contracting information [as defined by Texas Government Code Section 552. 003(7)] related to this Agreement as provided by the records retention requirements applicable to the District for the duration of the Agreement; (2) promptly provide to Hays CISD any contracting information related to the Agreement that is in the custody or possession of the Proposer on request of the District; and (3) on completion of the Agreement, either (a) provide at no cost to the District all contracting information related to the Agreement that is in the custody or possession of Proposer, or (b) preserve the contracting information related to the Agreement as provided by the records retention requirements applicable to the District. Proposer understands that if it knowingly or intentionally fails to comply with the requirements of Subchapter J.

I hereby understand and certify that the information that has been provided above is accurate. Failure to sign and certify could result in your response being deemed a no-bid.

Signature

Date

Print Name