

# **SECTION 5**

## **FORMS AND TEMPLATES**

### Form #1

## LETTER OF INTENT

#### A. Proposer Information

Offeror's Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### B. Contact Information

Name of Person with Signature Authority: \_\_\_\_\_

This person binds the offeror to the terms and conditions submitted in response to this RFP.

Title: \_\_\_\_\_

Address\*: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Name of Primary Contact Person:** \_\_\_\_\_

This person will be contacted if FDDC has questions about the offer submitted and if the offeror is chosen for contract negotiations.

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**\*Address should be one where UPS or Federal Express overnight delivery may be received, i.e. not a post office box.**

**Form #2**

**BUDGET REQUEST FORM**

BUDGET ITEM	MATCH AMOUNT	SOURCE OF MATCH	FDDC REQUESTED FUNDS	TOTAL COST
	<b>TOTAL</b>		<b>TOTAL</b>	<b>TOTAL</b>

Budget Narrative:

### Form #3

## REFERENCES FORM

(please sign original in BLUE ink)

Offerors are required to submit three (3) references for whom similar services have been performed as those requested in the RFP. **References must be for work done within the last five (5) years.** FDDC will contact two (2) out of the three (3) references provided to obtain an assessment of the offeror's past performance. For offerors with a history of contracting with FDDC, one of the references utilized will be the most recent FDDC assessment of performance. Three attempts will be made to contact each reference.

- 1) Name of Company or Agency:  
Contact Person:  
Phone Number:  
Address:  
Email Address:  
Project or service name or identifier:  
Approximate dates work was undertaken/completed:
  
- 2) Name of Company or Agency:  
Contact Person:  
Phone Number:  
Address:  
Email Address:  
Project or service name or identifier:  
Approximate dates work was undertaken/completed:
  
- 3) Name of Company or Agency:  
Contact Person:  
Phone Number:  
Address:  
Email Address:  
Project or service name or identifier:  
Approximate dates work was undertaken/completed:

Signature of Authorized Representative for Offeror: \_\_\_\_\_

**Form #4**

**FDDC REQUIRED CERTIFICATIONS**  
(please sign original in BLUE ink)

**Acceptance of Contract Terms and Conditions**

I hereby certify that should my agency be awarded this contract, it will comply with all the terms and conditions specified in the RFP and contained in the standard contract attached (Section 6: Terms & Conditions).

Signature of Authorized Official: \_\_\_\_\_ Date: \_\_\_\_\_

**Statement of No Involvement**

I hereby certify that my agency had no prior involvement in performing a feasibility study of the implementation of the of the subject contract, in the drafting of the RFP, or in developing the subject study.

Signature of Authorized Official: \_\_\_\_\_ Date: \_\_\_\_\_

**Conflict of Interest Statement (Non-collusion)**

I hereby certify, that all persons, companies or parties interested in the proposal as principals are named therein, that the proposal is made without collusion with any other person, persons, company or parties submitting a proposal; that it is in all respect made in good faith; and as the signer of the proposal, I have full authority to legally bind the offerors to the provisions of this proposal.

Signature of Authorized Official: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: An authorized official is defined as an officer of the offeror's organization who has legal authority to bind the offeror to the provisions of the proposal. This is usually the president, chairman of the board, or owner of the entity. A document establishing delegated authority must be included with the proposal if signed by anyone other than the president, chairman of the board, or owner.

**Form #5****CERTIFICATION REGARDING LOBBYING****(please sign original in BLUE ink)****CERTIFICATION FOR CONTRACTS, GRANTS, LOANS AND COOPERATIVE AGREEMENTS**

The undersigned certifies, to the best of his or her knowledge and belief that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Authorized Individual: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_

**Form #6**  
(please sign original in BLUE ink)

**CERTIFICATION REGARDING  
DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION  
CONTRACTS/SUBCONTRACTS**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, signed February 18, 1986. The guidelines were published in the May 29, 1987 Federal Register (52 Fed. Reg., pages 20360-20369).

INSTRUCTIONS

1. Each provider whose contract/subcontract equals or exceeds \$25,000 in federal monies must sign this certification prior to execution of each contract/subcontract. Additionally, providers who audit federal programs must also sign, regardless of the contract amount. FDDC cannot contract with these types of providers if they are debarred or suspended by the federal government.
2. This certification is a material representation of fact upon which reliance is placed when this contract/subcontract is entered into. If it is later determined that the signer knowingly rendered an erroneous certification, the Federal Government may pursue available remedies, including suspension and/or debarment.
3. The provider shall provide immediate written notice to the contract manager at any time the provider learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "debarred", "suspended", "ineligible", "person", "principal", and "voluntarily excluded", as used in this certification, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549.
5. The provider agrees by submitting this certification that, it shall not knowingly enter into any subcontract with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this contract/subcontract unless authorized by the Federal Government.
6. The provider further agrees by submitting this certification that it will require each subcontractor of this contract/subcontract, whose payment will equal or exceed \$25,000 in federal monies, to submit a signed copy of this certification.
7. Florida Developmental Disabilities Council, Inc. may rely upon a certification of a provider that it is not debarred, suspended, ineligible, or voluntarily excluded from contracting/subcontracting unless it knows that the certification is erroneous.
8. This signed certification must be kept in the contract manager's file. Subcontractor's certifications must be kept at the contractor's business location.

CERTIFICATION

1. The prospective provider certifies, by signing this certification, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract/subcontract by any federal department or agency.
2. Where the prospective provider is unable to certify to any of the statements in this certification, such prospective provider shall attach an explanation to this certification.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_