



CITY OF SAN ANTONIO

ASSURANCE OF COMPLIANCE
EQUAL EMPLOYMENT OPPORTUNITY
CITY OF SAN ANTONIO
MAY 1994

The bidder, _____, hereafter known as "contractor," as a part of the procedure for the submission of bids on a project known as _____ agrees to the following conditions if awarded a contract by the City of San Antonio, hereafter known as City, on the above named project.

1. The Contractor will not discriminate in any personnel action including hiring, promotion, suspension, termination, sick leave, work assignments, holidays and vacation on the basis of race, color, religion, national origin, sex, age, handicap, or political belief or affiliation.
2. The contractor will maintain a copy of its Affirmative Action Plan for Equal Employment Opportunity and will provide upon request to the City of San Antonio.
3. The Contractor agrees to provide the City with whatever information may be requested by the Affirmative Action Planning Section for the purpose of monitoring compliance with Contractor's affirmative action requirements.
4. The Contractor agrees to attempt to fill newly created positions with qualified persons, so that the Sex and Ethnic ratios approximate the ratios of the Civilian Labor Force as determined by the applicable U. S. Census Data for job classifications similar to those jobs created by the proposed contract.
5. The Contractor agrees to update its Affirmative Action Plan annually or as required by the City, taking into consideration changes in the Civilian Labor Force and the Contractor's needs to insure non-discrimination and affirmative action relevant to employment.

It is understood that failure to comply with any of these conditions may constitute a violation of the contract between the Contractor and the City and may result in termination of the contract and/or the barring of the Contractor from future contracts with the City.

FOR THE CONTRACTOR

NAME

SIGNATURE

TITLE



CITY OF SAN ANTONIO

CERTIFICATION OF NONSEGREGATED FACILITIES

_____ certifies that he
does not and will not maintain or provide for his employees any segregated facilities at any of his
establishments, and that he does not and will not permit his employees to perform their services at
any location, under his control, where segregated facilities are maintained.

Signature of Bidder's Representative

Typed or Printed Name and Title of
Bidder's Representative

STATEMENT ON PRESIDENT'S EXECUTIVE ORDERS

The undersigned bidder (has) (has not) previously performed work subject to the President's Executive Orders Nos. 11246 and 11375 or any preceding similar executive orders (Nos. 10925 and 11114).

Name of Bidder

Signature of Bidder's Representative

**Typed or Printed Name and Title of
Bidder's Representative**

**CITY OF SAN ANTONIO
DEPARTMENT OF CAPITAL IMPROVEMENTS MANAGEMENT SERVICES
CONTRACT SERVICES DIVISION**

RECEIPT OF ADDENDUM NUMBER(S) 1 IS HEREBY ACKNOWLEDGED FOR PLANS AND SPECIFICATIONS FOR **SALADO CREEK BICYCLE PATHS PROJECT** FOR WHICH BIDS WILL BE OPENED ON AUGUST 20, 2013.

THIS ACKNOWLEDGEMENT MUST BE SIGNED AND RETURNED WITH THE BID PACKAGE.

Company Name: _____

Address: _____

City/State/Zip Code: _____

Date: _____

Signature

Print Name/Title

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity 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 a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

State of Texas Child Support Business Ownership Form

County: [LG Insert County here]

Project Name: [LG Insert Project Name here]

TxDOT CSJ: [LG Insert TxDOT CSJ here]

LG Project Number: [LG Insert LG Project # here]

Business Entity Submitting Bid: _____

Section 231.006, Family Code, requires a bid for a contract paid from state funds to include the names and social security number of individuals owning 25% or more of the business entity submitting the bid.

1. In the spaces below please provide the names and social security number of individuals owning 25% or more of the business.

Name	Social Security Number
_____	_____
_____	_____
_____	_____
_____	_____

2. Please check the box below if no individual owns 25% or more of the business.

() No individual own 25% or more of the business.

Except as provided by Section 231.302(d), Family Code, a social security number is confidential and may be disclosed only for the purpose of responding to a request for information from an agency operating under the provisions of Part A and D to Title IV of the Federal Social Security Act (42 USC Section 601-617 and 651-699).

Under Section 231.006, Family Code, the vendor or applicant certifies that the individual or business entity named in this contract, bid, or application is not ineligible to receive the specified grant, loan, or payment and acknowledges that this contract may be terminated and payment may be withheld if this certification is inaccurate.

The information collected on this form will be maintained by [LG Insert LG Name here]. With few exceptions, you are entitled on request to be informed about the information collected about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you also are entitled to receive and review the information. Under Section 559.004 of the Government Code, you are also entitled to have information about you corrected that you believe is incorrect.

Signature

Date

Printed Name

IF THIS PROJECT IS A JOINT VENTURE,

ALL PARTIES TO THE JOINT VENTURE MUST PROVIDE A COMPLETED FORM.



CITY OF SAN ANTONIO

Certification of Non-Collusion

"The undersigned affirms that they are duly authorized to execute the proposed contract, that this company, corporation, firm, partnership or individual has not prepared this Bid in collusion with any other Bidder, and that the contents of this Bid as to prices, terms or conditions of said Bid have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this Bid.

By: _____

(Print or Type Name)

(Print or Type Title/Position with Business)

(Signature)

(Date)



CITY OF SAN ANTONIO

CERTIFICATION OF INTEREST IN OTHER BID PROPOSALS FOR THIS WORK

By signing this proposal, the bidding firm and the signer certify that the following information, as indicated by checking "Yes" or "No" below, is true, accurate, and complete.

- A. Quotation(s) have been issued in this firm's name to other firm(s) interested in this work for consideration for performing a portion of this work.

_____ YES

_____ NO

- B. If this proposal is the low bid, the bidder agrees to provide the following information prior to award of the contract.

1. Identify firms which bid as a prime contractor and from which the bidder received quotations for work on this project.
2. Identify all the firms which bid as a prime contractor to which the bidder gave quotations for work on this project.

The State of _____

County of _____

Certification of Absence of Suspension, Debarment, Voluntary Exclusion, or Determination of Ineligibility

The undersigned bidder, under penalty of perjury under the laws of the United States or the State of Texas, certifies that, except as noted herein, the bidder's firm and all persons associated therewith in the capacity of owner, partner, stockholder, director, officer, principal investigator, project director, manager, auditor, or any position involving the administration of any part of the firm's operations:

1. are not currently suspended, debarred, or voluntarily excluded from or determined to be ineligible for bidding by any federal agency;
2. have not been suspended, debarred, voluntarily excluded from or determined to be ineligible for bidding by any federal agency within the past three years;
3. do not have a proposed debarment pending with any federal agency; and
4. have not been indicted, convicted, or had a civil judgement rendered against it or any person indicated above by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three years.

All exceptions to the above are recorded in the following space:

The undersigned bidder understands that exceptions will not necessarily preclude the issuance of a bidding proposal or result in the denial of award of the contract for a federally-funded project. It is also understood that exceptions will be carefully reviewed by the department and by the Federal Highway Administration and may result in rejection of the bid proposal and suspension and debarment of the contractor pursuant to 43 Texas Administrative Code (TAQ Section 9.6, Procedure for Debarment of a Contractor, to 43 TAC Section 9.7, Procedure for Suspension of a Contractor, to 43 TAC Section 9.8, Supplemental Procedures for Suspension or Debarment of a Contractor, and/or Debarment and Suspension (Non-Procurement) 49 CFR Part 29.

For any exception noted, the following information explains to whom it applies, the initiating agency, and the dates of action.

The undersigned bidder understands that providing false information may result in criminal prosecution or administrative sanctions.

The bidder further certifies that all taxes, licenses, permits, fees, etc., as required by city, county, state or federal law relating to his/her business operations are current and unrestricted. In addition the undersigned authorizes the department to verify any and all information provided as determined necessary.

Print Firm Name

Signature/Title

Before me, the undersigned authority, a Notary Public, on this day personally appeared _____

who, being by me duly sworn, upon oath says that she/he is qualified and authorized to make affidavit for and on

behalf of _____

bidder, of _____ County, and is fully cognizant of the facts herein set out and affirms to the truth and accuracy of the certifications made herein by signing the document above.

Subscribed and sworn to before me by the said _____
Name

this _____ day of _____, _____, to certify which witness my hand and seal of office.

Notary Public in and for

County

Note: The Notary Public must be an individual other than an officer, partner, LLC member/manager, or an otherwise related party.



CITY OF SAN ANTONIO

Section 00440

LITIGATION DISCLOSURE FORM

The attached Litigation Disclosure Form will be completed and submitted with the bid for the construction of this project.

LITIGATION DISCLOSURE

Failure to fully and truthfully disclose the information required by this Litigation Disclosure form may result in the disqualification of your bid from consideration or termination of the contract, once awarded.

1. Have you or any member of your Firm or Team to be assigned to this engagement ever been indicted or convicted of a felony or misdemeanor greater than a Class C in the last five (5) years?

Circle One YES NO

2. Have you or any member of your Firm or Team been terminated (for cause or otherwise) from any work being performed for the City of San Antonio or any other Federal, State or Local Government, or Private Entity?

Circle One YES NO

3. Have you or any member of your Firm or Team been involved in any claim or litigation with the City of San Antonio or any other Federal, State or Local Government, or Private Entity during the last ten (10) years?

Circle One YES NO

If you have answered "Yes" to any of the above questions, please indicate the name(s) of the person(s), the nature, and the status and/or outcome of the information, indictment, conviction, termination, claim or litigation, as applicable. Any such information should be provided on a separate page, attached to this form and submitted with your bid.

TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS TRUE AND CORRECT.

Company Name: _____

Signature of Principal:

Printed Name of Principal:

Title of Principal