APPENDIX B
PROPOSAL FORM
099-18 Engineering Services for the Bartram/US1 and Cecil Field Water Main Construction Projects

COMPANY INFORMATION:

COMPANY NAME:_____

BUSINESS ADDRESS:_____

CITY, STATE, ZIP CODE:_____

TELEPHONE:_____

FAX:_____

EMAIL OF CONTACT:_____

PROJECT MANAGER PROXIMITY
In order to receive points for this criterion, Company's office must be occupied and staffed with at least three (3) employees for a duration of six (6) months prior to the Proposal Due Date stated in the RFP.
Check the box to confirm Company meets criterion □ YES □ NO

____ (Initials) I have read and understood the Sunshine Law/Public Records clauses contained within this solicitation. I understand that in the absence of a redacted copy my proposal will be disclosed to the public "as-is".

The Company shall submit one (1) original Proposal, three (3) duplicates (hardcopies), and four (4) CDs or USB drives. If there is a discrepancy between the electronic copy and hard copy, the hard copy will prevail. JEA will not accept Proposals transmitted via email.

Company's Certification

By submitting this Proposal, the Proposer certifies that it has read and reviewed all of the documents pertaining to this RFP and agrees to abide by the terms and conditions set forth therein, that the person signing below is an authorized representative of the company, that the company is legally authorized to do business in the State of Florida, and that the company maintains in active status an appropriate license for the work. The company certifies that its recent, current, and projected workload will not interfere with the company's ability to Work in a professional, diligent and timely manner.

The Proposer certifies, under penalty of perjury, that it holds all licenses, permits, certifications, insurances, bonds, and other credentials required by law, contract or practice to perform the Work. The Proposer also certifies that, upon the prospect of any change in the status of applicable licenses, permits, certifications, insurances, bonds or other credentials, the Company shall immediately notify JEA of status change.

We have received addenda _____through_____

_____ _____
Signature of Authorize Officer of Company or Agent Date

_____ _____
Printed Name & Title Phone Number