Detailed Proposal Form

Pre-Qualification Application

Name of Applicant Firm: Date Submitted: Preparer's Name:

Phase Two of TAMC's Reviewable Unsolicited Proposal process involves submitting this form and providing the information requested in the Request for a Detailed Proposal.

THIS PAGE MUST BE COMPLETED AND INCLUDED WITH THE APPLICATION
READ THE INSTRUCTIONS BEFORE FILLING OUT THE QUESTIONNAIRE

INSTRUCTIONS

- 1. This application should be completed by a person in the firm who is knowledgeable of and duly authorized to attest to the past and present operations of the firm and its policies.
- 2. All questions must be answered completely, and any "Yes" answers must be fully explained. Please note that a Yes answer to any question does not automatically result in denial of pre-qualification for a procurement.
- 3. Please be aware that TAMC is subject to the California Public Records Act and that some of the material to be submitted may be subject to public disclosure, pursuant to a Public Records Act Request. You are advised to consult with your own legal counsel as to which materials may be legally exempt from disclosure.

DEFINITIONS

- 1. **Affiliate** is defined as any one of the following:
 - a. Any Firm other than Applicant Firm which owns 25% or more of Applicant Firm, such as parent companies or holding companies;
 - b. A subsidiary or a Firm in which Applicant Firm owns 25% or more;
 - c. A Firm in which a major stockholder or owner of Applicant Firm owns controlling interest;
 - d. A Firm with which Applicant Firm has or has had an unseverable business or professional identity, and
 - e. Any permanent or temporary common business enterprise relationship in which the parties share operating responsibility and profits such as joint ventures.
- 2. **Key Person** For purposes of pre-qualification a key person is
 - a. Any person in Applicant Firm who owns 10% or more of the Firm and/or those who make decisions with respect to its operations, finances, or policies, such as the President, CEO, CFO, COO, and, in the case of partnerships, the General Partner(s);
 - b. Corporate Secretaries and Treasurers, as well as Directors, if they meet criteria #1, above;
 - c. Division or Regional Business Managers who operate away and independently from the Applicant Firm, but only if the division or regional office is negotiating directly with TAMC.

APPLICATION SUBMITTAL

Email this application to:

Executive Director info@tamcmonterey.org

If you have questions, call the TAMC office at (831) 775-0903.

SECTION I: IDENTIFICATION

1. Applicant Firm

A.	Name of Applicant Firm		Tax ID No. o	r Social Security Number
В.	Address			
C.	(Mailing Address, if differen	 nt from above)		
D.				
υ.	If doing business with TAM company and Tax ID No.,		other name, i	nclude legal name of the
E.	E. Primary Company Telephone No. () Fax No. ()			o. ()
F.	Applicant Firm's Contact P	erson for Pre-Quali	fication Office	follow-up:
	•			•
	Name	Position	E-Mail	Telephone Number
G.			e past five yea	n or its owner operated under ars? If yes, explain fully on a □ Yes
Н.	Type of business organiza	tion:		
	Year organization establish	ned: N	umber of curi	rent employees:
	☐ Sole Proprietor			
☐ Corporation: Date and State of Incorporation: ☐ Limited Liability Corporation (LLC): Date and State of Incorporat				
		d State of Inc	corporation:	
	□ Limited Partnership (LP)			
	☐ Limited Liability Partners	ship (LLP)		
	☐ General Partnership (Gl	P): Date and State	of Partnership	filing:
	☐ Other (describe):	•	·	

I.	List general type of business in which Applicant Firm is engaged (may include more than one). Attach copies of business licenses, if appropriate:
J.	List type of product or service to be provided to TAMC:

SECTION II: OWNERSHIP/MANAGEMENT, PROJECT TEAM MEMBERS, AND RELATED ENTITIES

List Owners and Key Persons of Applicant Firm. For large publicly traded companies, list only Key Persons. (See DEFINITIONS for clarification if necessary.)

	Full Le	egal Name	Title	Social Security No. (last four digits only)	% Of Ownership
			[Use additional shee	ts if necessary]	
2.	Related	Entities (Affiliate	es/Subsidiaries/Joint	Ventures)	
	no aff geogi	filiates, state NON raphical or function	NE. N/A is not an accer	s, joint ventures, etc., of Apotable answer. Provide orgesist in clarifying the line(s) ary.)	anizational,
		e Name & dress	Tel.# % Owned	Top Executive's Name	*Type of Relation
		3. Holding Co (HC), 4. Subsidiary (S),	ure (JV), 2. Parent Co (PC) 5. Other (O), please expla	nin.
		y time during the (if yes, explain ful		ny Owners or Key Persons	of Applicant
		Applicant Firm? □	If so, please explain in No	□ Yes	
	b.	companies? If s	ship interest in any otho o, please explain in a s No	er Firm other than shares o separate sheet. □ Yes	ot publicly owne

SECTION III: CONTRACTING HISTORY

1. Contracting History

A. List the applicant Firm's three largest government contracts, subcontracts, or sales. If none, list the three largest contracts with non-governmental entities.

		Contract #1	Contract #2	Contract #3
	ncy/Owner			
	tract No.			
Nam	ne/Location			
	cribe Goods or			
	vices Furnished			
	e you a Prime or			
	contractor?			
Date	t Date/Complete			
	tract Amount			
	ncy/Owner Contac	ct		
_	erify (Name/ Tel.)			
		WERS BELOW MU ATTACHED TO TI		NED ON A SEPARATE
В.			ess entity, minority-, or v	artment of Transportation woman-owned business?
C.	certificates or cert		ons?	ey Persons had any disadvantaged-, minority·
In the	nast five years had	s the Applicant Firm	or any Affiliate been th	e subject of any of the
	ring actions?	o the Apphoant Filling	or arry rumate boom an	o dubject of any of the
	J	debarred disqualifi	ed, or otherwise declar	ed ineligible to bid?
		•	□ Yes	ou monglote to blur
F			mmercial or private ow	ner?
			☐ Yes	1101.
F			te of being the low bidd	or?
٠.		•	□ Yes	GI:
G			□ 1 <i>□</i> 3	
G.			son including default?	
		•	son, including default?	
Ц	N □ Had liquidated da	lo	□ Yes	completion of a contract?

SECTION IV: CIVIL ACTIONS

If "Yes" to Sections IV, V or VI, provide details including a brief summary of cause(s) of action, indicate if Applicant Firm, Key Person or Affiliate Firms were plaintiffs (P) or defendants (D); define charges explicitly, by what authority, court or jurisdiction, etc. In the case of tax liens, please indicate whether the liens were resolved with the tax authorities. Please submit proof of payment or agreements to pay the liens.

Complete details are required!

1.	• • • • • • • • • • • • • • • • • • • •	Firm, any of its Key Persons, or any Affiliate been the eged violation of a civil antitrust law, or other federal,
2.		bast five years has, the Applicant Firm, any of its Key stiff or defendant in any lawsuit regarding services or lic agency? ☐ Yes
3.	Bankruptcy During the past five years, has the A reorganization under the bankruptcy ☐ No	pplicant Firm or any Affiliate filed for bankruptcy or laws? ☐ Yes
4.	Judgments, Liens and Claims During the past five years, has the A claim of \$25,000 or more by a subco □ No	pplicant Firm been the subject of a judgment, lien or ontractor or supplier? ☐ Yes
5.	Tax Liens During the past five years, has the A state or any other tax authority? □ No	pplicant Firm been the subject of a tax lien by federal, ☐ Yes

SECTION V: COMPLIANCE WITH LAWS AND OTHER REGULATIONS

1.		Criminal In the past five years has the Applicant Firm, any	of its principals, officers, or Affiliates been				
		convicted or currently charged with any of the fol					
	A.	A. Fraud in connection with obtaining, attempting agreement or transaction?	to obtain, or performing a public contract,				
		□ No □ Ye	es				
	B. Federal or state antitrust statutes, including price fixing collusion and bid rigging						
		□ No □ Ye	es				
	C.	Embezzlement, theft, forgery, bribery, making false statements, submitting false information, receiving stolen property, or making false claims to any public agency?					
		□ No □ Ye	es				
	D.	D. Misrepresenting minority or disadvantaged but one of its subcontractors?	siness entity status with regard to itself or				
		□ No □ Ye	es				
	E. Non-compliance with the prevailing wage requirements of California or similar laws of any other state?						
		□ No □ Ye	es				
	F.	F. Violation of any law, regulation or agreement to a government funded procurement?	relating to a conflict of interest with respec				
		□ No □ Ye	es				
	G.	G. Falsification, concealment, withholding and/or destruction of records relating to a public agreement or transaction?					
		□ No □ Ye	es				
	Н.	H. Violation of a statutory or regulatory provision private agreement or transaction?	or requirement applicable to a public or				
		□ No □ Ye	es				
	I.	 Do any Key Persons in Applicant Firm have a that were filed either before, during, or after the 	, , , , , ,				
		□ No □ Ye	es				

□ No

2. Regulatory Compliance

In the past five years, has Applicant Firm, any of its Key Persons, or Affiliates: A. Been cited for a violation of any labor law or regulation, including, but not limited to, child labor violations, failure to pay wages, failure to pay into a trust account, failure to remit or pay withheld taxes to tax authorities or unemployment insurance tax delinquencies? ПΝο ☐ Yes B. Been cited for an OSHA or Cal/OSHA "serious violation"? □ No □ Yes C. Been cited for a violation of federal, state or local environmental laws or regulations? □ No ☐ Yes D. Failed to comply with California corporate registration, federal, state or local licensing requirements? ☐ Yes □ No E. Failed to comply with California corporate registration, federal, state or local licensing requirements? □ No □ Yes F. Had its corporate status, business entity's license or any professional certification. suspended, revoked, or had otherwise been prohibited from doing business in the State of California, in the last three years? □ No ☐ Yes G. During the past five years, has Applicant Firm or any of its Key Persons had any certificates or certifications revoked or suspended, including disadvantaged-, minority-, or woman-owned business certifications? ПΝο □ Yes

H. Been suspended, debarred, disqualified, or otherwise declared ineligible to bid?

☐ Yes

SECTION VI: ETHICS

1. Conflict of Interest

A. Does the Applicant Firm or any of its Key Persons have any existing relationships could be construed as either personal or organizational conflicts of interest, or wh would give rise to a conflict if Applicant Firm should be a recipient of a contract with TAMC?					
			□ No	☐ Yes	
	B.		iny Owner, Key Per in fully):	on or Project Team member of Applicant Firm ever (if yes,	
		a.	Been an employee or as an Alternate	of TAMC, or served as a member of TAMC Board of Director	ors
			□ No	□ Yes	
		b.	Been related by blor Alternate?	od or marriage to an TAMC employee, TAMC Board members	er
			□ No	□ Yes	
2.	Po	litical,	Charitable, And C	her Contributions	
	На	s the A	Applicant Firm, any	f its Key Persons, or Affiliates ever, regardless of amount:	
A. Given (directly or indirectly), or offered to give on behalf of another or through ano person, money, contributions (including political contributions), or other benefits, to current TAMC Board Member or Alternate?			ons (including political contributions), or other benefits, to an		
			□ No	□ Yes	
B. Given, or offered to give on behalf of another, money, contributions, or other ber directly or indirectly, to any current or former TAMC employee?					
			□ No	□ Yes	
	C.	contra	actor to offer or give	IC employee, Board member or Alternate Board member, o money, contributions or other benefits, directly or indirectly, IC employee, Board member or alternate Board member?	
			□ No	□ Yes	
	D. Directed any person, including employees or subcontractors, to give money, contributions or other benefits, directly or indirectly, to any current or former TAMC employee, Board member, Alternate Board member, or to someone else in order to benefit an TAMC employee, Board member, or Alternate Board member?				
			□ No	☐ Yes	
	E.			1C employee, Board member, or Alternate Board member to charitable nonprofit organization?)
			□ No	□Yes	
	IF	YES T	O ANY OF THE AE	OVE, SUBMIT LIST OF CONTRIBUTIONS AND DETAILS.	

SECTION VII: ADDITIONAL DOCUMENTATION REQUIRED

Copies of the following documents are to be submitted with this application:

- 1. Applicant Firm's Current Local Business Licenses, if required by city, county or state, and
- 2. Applicant Firm's Financial Statements:
 - A. PUBLICLY TRADED COMPANIES: Financial information will be accessed on-line. However, if additional information is needed, it will be specifically requested from the firm.
 - B. NON-PUBLICLY TRADED COMPANIES WITH AUDITED OR REVIEWED FINANCIAL STATEMENTS: Statements, including balance sheet, statement of earnings and retained income, with footnotes, for the most recent three years.
 - C. NON-PUBLICLY TRADED COMPANIES WITHOUT AUDITED OR REVIEWED FINANCIAL STATEMENTS: Company generated financial statements, including balance sheet, statement of earnings and retained income for the most recent three years. The Chief Financial Officer of the corporation, a partner, or owner, as appropriate, must certify these financial statements.
 - D. SOLE PROPRIETORSHIPS: Refer to C. If financial statements are not generated, please fill out and sign the Financial Statement form. Submit one form for each of the most recent three years.

NOTE: TAMC reserves the right to ask for additional documentation if it is reasonably required to make a determination of integrity and responsibility relevant to the goods or services the Applicant Firm will provide to TAMC if awarded a contract.

Financial Statement

This information is provided for pre-qualification purposes only. This document is considered a confidential document not subject to public disclosure under California law.

To be completed by Applicant Firms that do not produce company generated financial statements, including balance sheet, statement of earnings and retained income for the most recent three years (one sheet per year.)

ASSETS			
Cash on Hand and in Banks	\$		
Account and Notes Receivable	\$		
Fixed Assets (net of depreciation	\$		
Other Assets	\$		
Total Assets	\$		
LIABILITIES			
Accounts Payable	\$		
Notes Payable to Banks (in next 12 months)	\$		
Notes Payable to Others	\$		
Taxes Payable	\$		
Long Term Liabilities (more than 12 months)	\$		
Other Liabilities	\$		
Total Liabilities	\$		
Net Worth	\$		
INCOME FROM OPERATIONS			
Revenue	\$		
Interest from Bank Accounts	\$		
Cost of Goods Sold (if appropriate)	\$		
Gross Profit	\$		
General & Administrative Expenses	\$		
Depreciation	\$		
Interest Paid	\$		
Net Gain or Loss	\$		

I hereby certify that the above information is true and accurate to the best of my knowledge and belief. I understand false statements may result in denial of pre-qualification, and possible debarment for a period of five years.		
Signature of Owner or Officer	Date Signed	
Company Name	For the Year Ended	
Federal ID #	-	