## Exhibit B - Instructions

Please review each question and respond to each one completely.

## Bidder Information

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| --- | --- | --- | --- | --- |
| **1. Name of Legal Entity** | | | **2. Mailing Address** | |
| Full name of the legal entity serving as the bidder | | | Mailing address of this legal entity | |
| **3. Company Website** | | | **4. Physical Address (if different)** | |
| Provide the website for the company | | | Provide the physical address of this legal entity | |
| **5. List of Principal Officers**  Provide names for individuals such as the president, vice president, board chairman of the organization. | | | | |
| **Officers Name** | **Title** | | **Address** | |
| Officer Name | Title | | Address | |
| Officer Name | Title | | Address | |
| Officer Name | Title | | Address | |
| Officer Name | Title | | Address | |
| **6. Bidder’s Washington Department of Revenue Registration Number/Unified Business Identifier (UBI Number)** | | | | |
| Nine Digit UBI number is assigned to each registered business in WA | | | | |
| **7. Taxpayer Identification Number (TIN)**  Note: Your TIN will be either a number issued by the IRS (for example, Employer Identification Number, Federal Tax Identification Number) or a number issued by the Social Security Administration (in other words, your Social Security Number). If your TIN is an SSN, state that fact, but do NOT provide the SSN. | | | | |
| Nine Digit TIN number is assigned to each registered business in WA | | | | |
| **8. Washington Minority Business Enterprise Certification Number (if applicable)** | | | | |
| WMBE number is assigned to business registered with the Washington State Office of Minority and Women’s Business Enterprises (OMWBE) | | | | |
| **9. RFP Contact Information** | | | | |
| **Name** | | **Title** | | **Telephone Number** |
| Officer Name | | Title | | Phone Number |
| **Email Address** | | **Address** | | |
| Email Address for RFP Contact | | Mailing address for RFP Contact | | |

## Certifications and Assurances

Bidder, through the duly authorized undersigned, makes the following certifications and assurances as a required element of submitting a responsive bid. Bidder certifies, to the best of its knowledge and belief, that as of the date of the proposal, the following are true, complete, correct, and made in good faith:

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| **10. Accuracy**  The Bidder declares that all answers and statements made in the proposal are true and correct. |
| Choose an item. |
| **11. Understanding**  The Bidder agrees that submission of the attached proposal constitutes understanding and acceptance of the solicitation contents and the attached general terms and conditions. If there are any exceptions to these terms, I/we have described those exceptions in my/our responses to those terms and conditions. |
| Choose an item. |
| **12. Firm Offer**  The Bidder assures that the attached proposal is a firm offer for a period of 180 days following receipt, and it may be accepted by DRS without further negotiation (except where obviously required by lack of certainty in key terms) at any time within the 180-day period. |
| Choose an item. |
| **13. No Reimbursement**  The Bidder assures that it will not be reimbursed for any costs incurred in the preparation of this proposal. All proposals become the property of DRS, and the Bidder will claim no proprietary right to the ideas, writings, items or samples, unless so stated in this proposal. |
| Choose an item. |
| **14. Business Registration**  The Bidder assures that it is registered with the Washington Secretary of State and is in good standing or agrees to register with the Washington Secretary of State prior to contract execution. |
| Choose an item. |
| **15. Business License**  The Bidder assures it is registered with the Washington State Department of Revenue and has a business license to do business in Washington or agrees to register with the Washington State Department of Revenue and obtain a license prior to contract execution. |
| Choose an item. |
| **16. References**  The Bidder grants DRS the right to contact references and others who may have pertinent information regarding Key Personnel’s prior experience and ability to perform the services requested in this procurement. |
| Choose an item. |
| **17. No Price Collusion**  The Bidder assures that the prices and/or cost data have been determined independently, without consultation, communication or agreement with others for the purpose of restricting competition. However, the Bidder may freely join with other persons or organizations for the purpose of presenting a single proposal. |
| Choose an item. |
| **18. No Disclosure of Prices**  The Bidder assures that, unless otherwise required by law, the prices and/or cost data that have been submitted have not been knowingly disclosed by the Bidder and will not knowingly be disclosed, directly or indirectly, to any other Bidder or to any competitor prior to the deadline for submitting proposals. |
| Choose an item. |
| **19. No Restricting Competition**  The Bidder assures that no attempt has been made or will be made by the Bidder to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition. |
| Choose an item. |

## Company Declarations

Bidder declares, as a required element of submitting a responsive bid, that the following facts affirmed below are truthful and understands continuing compliance with these requirements are conditions precedent to the award or continuation of work.

|  |
| --- |
| **20. Termination for Default** |
| (a) Have you had a contract terminated for default in the last five years? For purposes of this declaration, termination for default is defined as notice from your customer to stop performance due to your non-performance or poor performance, and the issue of performance was either not litigated due to inaction on the part of the customer, was settled by the parties, or it was litigated and determined that the Bidder was in default. |
| Choose an item. |
| (b) If yes, describe details of the situation below. Include the other party’s name, address and phone number. Present your position on the matter. DRS will evaluate the facts, and may, at its sole discretion, reject the proposal based on the prior default. |
| Click or tap here to enter text. |
| **21. Retirement Status Verification** |
| (a) Are you, or is any individual who will provide services to DRS as a result of the prospective contract, receiving retirement benefits from a Washington state public retirement system? |
| Choose an item. |
| (b) If yes, describe details of the situation below. DRS will evaluate the facts and circumstances. [RCW 41.40.037](https://apps.leg.wa.gov/RCW/default.aspx?cite=41.40.037) or [RCW 41.40.630](https://app.leg.wa.gov/RCW/default.aspx?cite=41.40.630) may prohibit a person from performing work related to a prospective contract. You may contact the DRS RFP Coordinator for more information. |
| Click or tap here to enter text. |
| **22. Conflict of Interest** |
| (a) Are you, or do you employ or have as a principal officer or member of your governing board, a current employee of the State of Washington? |
| Choose an item. |
| (b) Are you, or do you employ or have as a principal officer or member of your governing board, a former employee of the State of Washington who worked for the state as an employee within the last two years? |
| Choose an item. |
| (d) If you answered yes to any questions above, provide the following information:   * Current or former state employee’s name * The individual’s position with your company * Current or former state agency where the individual is/was employed * Date the individual left state employment if applicable * Name and contact information for an official at the employing state agency   DRS will evaluate the facts and circumstances. [RCW 42.52.080](https://app.leg.wa.gov/RCW/default.aspx?cite=42.52.080) may prohibit the person from performing work related to the prospective contract. You may contact the DRS RFP Coordinator for more information. |
| Click or tap here to enter text. |
| **23. Wage Theft Prevention - Responsible Bidder Criteria** |
| Prior to awarding a contract, agencies are required to determine that a Bidder is a “responsible bidder.” See [RCW 39.26.160](https://app.leg.wa.gov/RCW/default.aspx?cite=39.26.160) (2) and (4). Pursuant to legislative enactment in 2017, the responsible bidder criteria include a contractor certification that the contractor has not willfully violated Washington’s wage laws. See [Chapter 258, Laws of 2017](http://lawfilesext.leg.wa.gov/biennium/2017-18/Pdf/Bills/Session%20Laws/Senate/5301-S.SL.pdf#page=1) (enacting SSB 5301).  ***Note:*** Failure to respond will result in the proposal being deemed non-responsive. |
| (a) Have you willfully violated, as defined in [RCW 49.48.082](http://app.leg.wa.gov/RCW/default.aspx?cite=49.48.082), any provision of RCW chapters [49.46](http://app.leg.wa.gov/RCW/default.aspx?cite=49.46), [49.48](http://app.leg.wa.gov/RCW/default.aspx?cite=49.48) or [49.52](http://app.leg.wa.gov/RCW/default.aspx?cite=49.52) within three years prior to the date of this Request for Proposals, as determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction? |
| Choose an item. |
| (b) If you answered yes to the question above, provide additional information about the circumstances related to this wage violation. |
| Click or tap here to enter text. |
| **24. Workers’ Rights** |
| DRS is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers, the [Washington State Governor’s Executive Order 18-03](https://www.governor.wa.gov/sites/default/files/exe_order/18-03%20-%20Workers%20Rights%20%28tmp%29.pdf?=32717) (dated June 12, 2018). |
| (a) Do you confirm that you do NOT require your employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers (in other words, **no mandatory individual arbitration clauses and class or collection action waivers for employees**). |
| Choose an item. |
| (b) If you answered no to the question above, provide additional information about the arbitration clauses and class or collective action waivers employees are required to enter. |
| Click or tap here to enter text. |
| **25. Washington Small Business** |
| Are you a Washington Small Business as defined in [RCW 39.26.010](https://apps.leg.wa.gov/rcw/default.aspx?cite=39.26&full=true#39.26.010)? To qualify as a Washington Small Business, the Bidder must meet three (3) requirements:   * Location. Bidder’s principal office/place of business must be located in and identified as being in the State of Washington. A principal office or principal place of business is a firm’s headquarters where business decisions are made and the location for the firm’s books and records as well as the firm’s senior management personnel. * Size. Bidder must be owned and operated independently from all other businesses and have either: (a) fifty (50) or fewer employees; or (b) gross revenue of less than seven million dollars ($7,000,000) annually as reported on Bidder’s federal income tax return, or its return filed with the Washington State Department of Revenue over the previous three consecutive years. * WEBS Certification. Bidder must have certified its Washington Small Business status in Washington’s Electronic Business Solution (WEBS). |
| Choose an item. |
| **26. Veteran-Owned Business** |
| Are you a Certified Veteran-Owned Business under [RCW 43.60A.190](https://app.leg.wa.gov/RCW/default.aspx?cite=43.60A.190)? To qualify as a Certified Veteran-Owned Business, the Bidder must meet four (4) requirements:   * 51% Ownership. Bidder must be at least fifty-one percent (51%) owned and controlled by:   + A veteran as defined as every person who at the time he or she seeks certification has received a discharge with an honorable characterization or received a discharge for medical reasons with an honorable record, where applicable, and who has served in at least one of the capacities listed in [RCW 41.04.007](https://apps.leg.wa.gov/RCW/default.aspx?cite=41.04.007);   + A person who is in receipt of disability compensation or pension from the Department of Veterans Affairs; or   + An active or reserve member in any branch of the armed forces of the United States, including the national guard, coast guard, and armed forces reserves. * Washington Incorporation/Location. Bidder must be either an entity that is incorporated in the state of Washington as a Washington domestic corporation or, if not incorporated, an entity whose principal place of business is located within the State of Washington. * WEBS Certification. Bidder must have certified its Veteran-Owned business status in Washington’s Electronic Business Solution (WEBS). * WDVA Certification. Bidder must have provided certification documentation to the Washington Department of Veterans’ Affairs (WDVA) and be certified by WDVA and listed as such on WDVA’s website (WDVA - Veteran-Owned Businesses). |
| Choose an item. |
| **27. COVID-19 Contractor Verification Plan** |
| (a) The Bidder certifies that it:   * Has reviewed and understands Contractor’s obligations as set forth in [Proclamation 21-14 – COVID-19 Vaccination Requirement](https://www.governor.wa.gov/sites/default/files/proclamations/21-14%20-%20COVID-19%20Vax%20Washington%20%28tmp%29.pdf) (dated August 9, 2021), as amended by [Proclamation 21-14.1 – COVID-19 Vaccination Requirement](https://www.governor.wa.gov/sites/default/files/proclamations/21-14.1%20-%20COVID-19%20Vax%20Washington%20Amendment.pdf) (dated August 20, 2021), as further amended by [Proclamation 21-14.2 – COVID-19 Vaccination Requirement](https://www.governor.wa.gov/sites/default/files/proclamations/21-14.2%20-%20COVID-19%20Vax%20Washington%20Amendment%20%28tmp%29.pdf) (dated September 27, 2021); * Has developed a COVID-19 Vaccination Verification Plan for Contractor’s personnel (including subcontractors) that complies with the above-referenced Proclamation; * Has obtained a copy or visually observed proof of full vaccination against COVID-19 for Contractor personnel (including subcontractors) who are subject to the vaccination requirement in the above-referenced Proclamation; * Complies with the requirements for granting disability and religious accommodations for Contractor personnel (including subcontractors) who are subject to the vaccination requirement in the above-referenced Proclamation; * Has operational procedures in place to ensure that any contract activities that occur in person and on-site at DRS premises that are performed by Contractor personnel (including subcontractors) will be performed by personnel who are fully vaccinated or properly exempted as required by the above-referenced Proclamation; * Has operational procedures in place to enable Contractor personnel (including subcontractors) who perform contract activities on-site and provide compliance documentation that such personnel are in compliance with the above-referenced Proclamation; and will provide to, upon request, Contractor’s COVID-19 Vaccination Verification Plan and related records, except as prohibited by law, and will cooperate with any investigation or inquiry pertaining to the same. |
| Choose an item. |
| (b) If you do not concur with the statement above, provide additional information about the aspects of the COVID-19 Contractor Verification Plan that you are not able to meet. |
| Click or tap here to enter text. |

## Certification

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the declarations, certifications and assurances herein are true and correct and that I am authorized to make these certifications on behalf of the Bidder listed herein.

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| --- | --- |
| **Signature** | **Date Signed** |
| Click or tap here to enter text. | Click or tap to enter a date. |
| **Printed Name** | **Title** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| **Company Name** | **Place Signed** |
| Click or tap here to enter text. | Click or tap here to enter text. |