**RESPONDENT QUESTIONNAIRE**

**PROJECT NAME: Underwriting Services RFQ**

**Instructions:**  The Respondent Questionnaire is a required questionnaire. Complete the questionnaire by inserting the requested information. Do not modify or delete the questions.

**GENERAL INFORMATION**

1. **Respondent Information:** Provide the following information regarding the Respondent.

(NOTE: Co-Respondents are two or more entities proposing as a team or joint venture with each signing the contract, if awarded. Sub-Consultants are not Co-Respondents and should not be identified here. If this SOQ includes Co-Respondents, provide the required information in this Item #1 for each Co-Respondent by copying and inserting an additional block(s) before Item #2.)

 Respondent Name:

 (NOTE: Give exact legal name as it will appear on the contract, if awarded.)

Principal Address:

 City: State: Zip Code:

Telephone No. Fax No:

Social Security Number or Federal Employer Identification Number:

2. **Operational Contact Information:** List the one person who SAWS may contact concerning your SOQ or setting dates for meetings.

Name:

Address:

City: State: Zip Code:

Telephone No. Fax No:

Email:

3. **Legal Contact Information:** If a contract were to be awarded, list where all notices under the Contract shall be sent to. This is in addition to the Operational Contact.

Name:

Address:

City: State: Zip Code:

Telephone No. Fax No:

Email:

4. Identify the principal contact person authorized to commit the Respondent to a contractual agreement.

5. Does Respondent anticipate any mergers, transfer of organization ownership, management reorganization, or departure of key personnel within the next twelve (12) months?

Yes [ ]  No [ ]

6. Is Respondent authorized and/or licensed to do business in Texas?

Yes [ ]  No [ ]  If “Yes”, list authorizations/licenses.

7. **Affirmative Action -** Respondent agrees to adhere to the EEO requirements contained in the RFQ section V, sub-section B.,1.

Yes [ ]  No [ ]  If “No”, state reason.

8. **Debarment/Suspension Information:** Has the Respondent or any of its principals been debarred or suspended from contracting with any public entity?

Yes [ ]  No [ ]  If “Yes”, identify the public entity and the name and current phone number of a representative of the public entity familiar with the debarment or suspension, and state the reason for or circumstances surrounding the debarment or suspension, including but not limited to the period of time for such debarment or suspension.

9. **Bankruptcy Information:**  Has the Respondent ever been declared bankrupt or filed for protection from creditors under state or federal proceedings?

Yes [ ]  No [ ]  If “Yes”, state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.

10. Provide any other names under which Respondent has operated within the last 10 years.

11. **Litigation Disclosure**: Respond to each of the questions below by checking the appropriate box. Failure to fully and truthfully disclose the information required in the Litigation Disclosure questions may result in the disqualification of your SOQ from consideration or termination of the contract, once awarded.

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

 Yes [ ]  No [ ]

b. Have you or any member of your Firm or Team to be assigned to this project been terminated (for cause or otherwise) from any work being performed for the San Antonio Water System or any other Federal, State or Local Government, or Private Entity?

 Yes [ ]  No [ ]

c. Have you or any member of your Firm or Team to be assigned to this project been involved in any claim or litigation with the San Antonio Water System or any other Federal, State or Local Government, or Private Entity during the last ten (10) years?

 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 SOQ.

12. **Compliance Agreement:**

Nondisclosure. No information obtained by Respondent from SAWS shall be disclosed by Respondent to any third party. In the event Respondent is subject to the Texas Public Information Act, upon receipt of a request for any information obtained by Respondent, Respondent shall provide notice to SAWS of the request along with a copy of the request, and give SAWS the opportunity to respond to the request prior to its release by Respondent.

No Lobbying and Compliance with Law. During the selection process for the project named in this RFQ, Respondent agrees to comply with all applicable laws and regulations, including but not limited to restrictions against direct or indirect lobbying of public officials. Respondent agrees not to make or permit to be made any improper payments, or to perform any unlawful acts.

This agreement shall be construed to be enforceable to the maximum extent permitted by law.

Failure to complete this question or comply with its terms may subject this firm to elimination from the selection process at any time.

Does the Respondent agree to the above?

Yes [ ]  No [ ]

13. **Security Procedures:** Respondent acknowledges having read the security procedures in Exhibit “D” and understands the requirements. Respondent is prepared to perform at their own expense background security checks on their employees, or the employees of their consultants or sub-consultants if requested by SAWS.

Yes [ ]  No [ ]

14. **No Boycotting Israel Verification:** Respondent acknowledges having read the No Boycotting Israel Verification Exhibit “E” and understands the requirements. Respondent can and will make this verification if awarded a contract.

Yes [ ]  No [ ]

15. **Terms and Conditions:** Respondent acknowledges having read the requirements identified within this RFQ. By responding to this RFQ, Respondent agrees to these terms and conditions.

No Exceptions [ ]  Exceptions [ ]  If “Exceptions”, they must be submitted with the SOQ. Respondents shall submit exceptions with proposed alternative language to SAWS as an attachment accompanying this questionnaire.

Exceptions will not be accepted after the SOQ due date and time. At the sole discretion of SAWS, the type and nature of exceptions may be grounds for disqualification.

16. **Addendums:** Each Respondent is required to acknowledge receipt of all addendums.

None [ ]  Yes [ ]  If “Yes”, Identify.

The information provided above is true and accurate to the best of my knowledge. Furthermore, we understand that failure to complete the Respondent Questionnaire may subject this firm to elimination from the selection process.

 Signature Date

 Printed Name

 Title

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**EXHIBIT “B”**

**Good Faith Effort Plan for Professional Services SUB-CONSULTING for:**

NOTE: Small Business Enterprise (SBE) points shall only be assessed for Respondents who are local and certified by the South Central Texas Regional Certification Agency as SBEs.

##  NAME OF PROJECT: Underwriting Services RFQ

**SECTION A - PRIME CONSULTANT INFORMATION**

**Legal Name of Firm, including "doing business as" if applicable:**

**Address of Office to Perform Project Work:**

|  |  |  |
| --- | --- | --- |
| **City:** |  **State:** |  **Zip Code:**  |
| **Telephone:** |  **Fax:** |  |

**Contact Person:**

**Email Address:**

**Is your firm Certified as an SBE?**

 **Yes: No:**

**If "Yes", Certification Agency that granted SBE designation:**

**AFFIRMATION**

I hereby affirm that the above information is true and complete to the best of my knowledge. I further understand and agree that, this document shall be attached thereto and become a binding part of the contract:

|  |
| --- |
| **Name and Title of Authorized Official:** |
| Name:  |
| Title:  |
| Signature:  |
| Date:  |
| **NOTE:** |
| This Good Faith Effort Plan is reviewed by SAWS Contracting Department. For questions and/or clarifications, please contact Marisol V.Robles, SMWVB Program Manager, at 210-233-3420 or marisol.robles@saws.org. |
| **DEFINITIONS** |
| **Note: To be eligible for participation in the SAWS Small, Minority, Woman, and Veteran-owned Business Program, a firm must have an established place of business in the San Antonio Metropolitan Statistical Area, and must be certified as a Small Business Enterprise (SBE). This includes firms certified as Minority and/or Woman-owned Business Enterprises (MBEs and WBEs). SAWS tracks Veteran-owned Business Enterprises (VBEs) for statistical purposes, but does not award points for VBE participation.** |
| **African American Business Enterprise (AABE):** A business structure that is Certified by the Texas Historically Underutilized Business (HUB) Program or the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by African American minority group member(s) who are legally residing in or are citizens of the United States. |
| **Local:** A business located in the San Antonio Metropolitan Statistical Area (SAMSA) , which includes the counties of Atascosa, Bandera, Bexar, Comal, Frio, Guadalupe, Kendall, Kerr, McMullen, Medina, Uvalde and Wilson. A business’s presence in the SAMSA that consists solely of a P.O. box, a mail drop, or a telephone message center does not count as being local. |
| **Prime Consultant/Consultant:** Any person, firm partnership, corporation, association or joint venture which has been awarded a San Antonio Water System contract. |
| **Sub-consultants/Consultant:** Any named person, firm partnership, corporation, association or joint venture identified as providing work, labor, services, supplies, equipment, materials or any combination of the foregoing under contract with a prime consultant/Consultant on a San Antonio Water System contract. |
| **Small, Minority, and Woman-owned Business (SMWB):** All business structures Certified by the Texas Historically Underutilized Business (HUB) Program or the South Central Texas Regional Certification Agency that are 51% owned, operated, and controlled by a Small Business Enterprise, a Minority Business Enterprise, or a Woman-owned Business Enterprise. |
| **Small Business Enterprise (SBE):** A business structure that is Certified by the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by someone who is legally residing in or a citizen of the United States, and the business structure meets the U.S. Small Business Administration’s (SBA) size standard for a small business within the appropriate industry category, as determined by the South Central Texas Regional Certification Agency. |
| **Minority Business Enterprise (MBE**): A business structure that is Certified by the Texas Historically Underutilized Business (HUB) Program or the South Central Texas Regional Certification Agency as being 51% owned, operated, and controlled by an ethnic minority group member(s) who is legally residing in or a citizen of the United States. For purposes of the SMWB program, the following are recognized as minority groups: |

|  |
| --- |
| **San Antonio Metropolitan Statistical Area (SAMSA).** Also known as the Relevant Marketplace, the geographic market area from which the prior Disparity Study analyzed contract utilization and availability data for disparity (currently including the counties of Atascosa, Bandera, Bexar, Comal, Frio, Guadalupe, Kendall, Kerr, McMullen, Medina, Uvalde and Wilson). |
| **Woman-owned Business Enterprise (WBE):** A business structure that is Certified by the Texas Historically Underutilized Business (HUB) Program or the South Central Texas Regional Certification Agency as being 51% owned, operated and controlled by a woman or women who are legally residing in or citizens of the United States. |
| **Veteran-Owned Business Enterprise (VBE):** A business structure that is certified by the South Central Texas Regional Certification Agency, and is at least 51% owned, operated and controlled by an individual who served in the United States Armed Forces, and who was discharged or released under conditions other than dishonorable. Please note: This certification type should not be confused with the Service Disabled Veteran designation available through the Small Business Administration. |

**CONFLICT OF INTEREST QUESTIONNAIRE**

**For vendor doing business with local governmental entity**

**FORM CIQ**

**This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.**

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. *See* Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

**OFFICE USE ONLY**

Date Received

**1 Name of vendor who has a business relationship with local governmental entity.**

**2**

**Check this box if you are filing an update to a previously filed questionnaire.** (The law requires that you file an updated

completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

1. **Name of local government officer about whom the information is being disclosed.**

Name of Officer

1. **Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.**
	1. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes No

* 1. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes No

1. **Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.**

**6**

Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

**7**

Signature of vendor doing business with the governmental entity Date

**CONFLICT OF INTEREST QUESTIONNAIRE**

**For vendor doing business with local governmental entity**

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/> Docs/LG/htm/LG.176.htm. For easy reference, below are some of the sections cited on this form.

**Local Government Code § 176.001(1-a):** "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

1. a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
2. a transaction conducted at a price and subject to terms available to the public; or
3. a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

**Local Government Code § 176.003(a)(2)(A) and (B):**

* 1. A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

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* + 1. the vendor:
			1. has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds $2,500 during the 12-month period preceding the date that the officer becomes aware that
				1. a contract between the local governmental entity and vendor has been executed; or
				2. the local governmental entity is considering entering into a contract with the vendor;
			2. has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than $100 in the 12-month period preceding the date the officer becomes aware that:
				1. a contract between the local governmental entity and vendor has been executed; or
				2. the local governmental entity is considering entering into a contract with the vendor.

**Local Government Code § 176.006(a) and (a-1)**

1. A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:
	1. has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
	2. has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
	3. has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

1. the date that the vendor:
	1. begins discussions or negotiations to enter into a contract with the local governmental entity; or
	2. submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or
2. the date the vendor becomes aware:
	1. of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);
	2. that the vendor has given one or more gifts described by Subsection (a); or
	3. of a family relationship with a local government officer.

Form provided by Texas Ethics Commission [www.ethics.state.tx.us](http://www.ethics.state.tx.us) Revised 11/30/2015