

Office of Mental Health Mid-Hudson Forensic Replacement Hospital

Request For Qualifications RFQ



New York State Office of Mental Health



Dormitory Authority of the State of New York

June 17, 2019

Request for Qualifications (RFQ)

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Section 1 - General Information:

1.1 Background

The Dormitory Authority State of New York (“DASNY” or “Owner”) is a public benefit corporation of the State of New York empowered by Titles 4 and 4-B of the Public Authorities Law (the “Act”), to provide design and project management services, and to issue its bonds, notes and other obligations, for a wide variety of public purposes. Under the Act, DASNY provides a multitude of services in various forms in connection with the design, construction and financing of capital facilities for State University of New York, including dormitories and educational facilities; City University of New York Senior Colleges; Community Colleges; Boards of Cooperative Educational Services; Cities and Counties with respect to Court Facilities and combined occupancy structures, as defined by law; the Department of Education of the State of New York with respect to certain facilities under its jurisdiction; other State and local governmental entities; independent colleges and universities; facilities for the aged; certain not-for-profit hospitals and nursing homes, as well as a wide variety of other not-for-profit organizations specifically described in the Act.

New York State has a large, multi-faceted mental health system that serves more than 700,000 individuals each year. The New York State Office of Mental Health (OMH) operates psychiatric centers across the State, and also regulates, certifies and oversees more than 4,500 programs, which are operated by local governments and nonprofit agencies. These programs include various inpatient and outpatient programs, emergency, community support, residential and family care programs.

OMH Mission

The Mission of OMH is to promote the mental health of all New Yorkers, with a particular focus on providing hope and recovery for adults with serious mental illness and children with serious emotional disturbances.

Mid-Hudson Forensic Psychiatric Center (MHFPC) is a secure adult psychiatric center located at 2834 Route 17-M New Hampton, NY 10958 (the “Campus”) that provides a comprehensive program of evaluation, treatment, and rehabilitation for patients admitted by court order. These admissions are consequent to judicial findings of "incompetent to stand trial" or "not responsible by reason of mental disease or defect."

1.2 Purpose

DASNY issues this Request for Qualifications (RFQ) seeking a responsive Statement of Qualifications (“SOQ”) from a qualified Architectural/Engineering Firm (A/E) capable of providing programming, design, procurement support and construction administration services associated with the construction of a new 250 bed (plus 25 additional swing space beds) forensic inpatient services building on the Campus. (the “Project”).

▪ **The Project Goals**

Project goals include, but are not limited to, the following:

- Occupant Safety
- Creating a home like environment
- Maximize the use of Greenspace
- Delivering a project that is on-time and on-budget
- Target USGBC LEED Silver or better

- The Project Budget

The total budget including all hard and soft costs for the entire development is approximately \$280 million.

- The Project Timeline

Project timeline is anticipated to begin in Early January 2020 and must be completed for occupancy by the fall of 2025.

1.3 Key Events and Dates

Responses to the RFQ are due in accordance with the schedule provided below. This schedule is firm unless DASNY changes the dates in an Addendum in writing that will be posted to DASNY's website at www.dasny.org. Architectural/Engineering Firms are solely responsible for obtaining all such changes to the submission schedule or other supplemental instructions and any interpretations and supplemental instructions that may have been issued, as well as acknowledging receipt of any interpretations and supplemental instructions that are issued.

<u>Event</u>	<u>Date</u>
Issuance of RFQ	06/17/19
Deadline for RFQ Questions	06/24/19 (5:00 p.m.)
Post Responses to RFQ Questions	06/28/19
SOQ Due Date	07/16/19 (5:00 p.m.)
Interviews/Presentations (if needed/not earlier than)	08/05/19
Selection of Shortlisted Teams (not earlier than)	08/09/19
RFP issued to Shortlisted Teams (anticipated)	08/13/19
RFP Proposals Due (anticipated)	09/10/19

1.4 Procurement Structure

DASNY shall use a two-step selection process for the Project consisting of (1) this RFQ and (2) a subsequently-issued Request for Proposal (RFP).

The SOQ submittal, evaluation, and selection processes are defined herein. DASNY intends, but is not bound, to shortlist three or four Architectural/Engineering Firms depending on the submittals received; provided, however, DASNY reserves the right to increase or decrease the number of shortlisted firms if deemed necessary.

The shortlisted Architectural/Engineering Firms will be provided an opportunity to respond to the subsequent RFP.

The Architectural/Engineering Firms responding to the subsequent RFP will be expected to develop a design concept and approach sufficient to address site, budgetary, and schedule parameters provided for in the subsequent RFP.

Section 2 - Engagement Requirements:

2.1 Project Scope of Work

The Scope of Work for the Project shall be further be defined and identified in the subsequent RFP.

The Project's Scope of Work shall include, but is not limited to the following:

Programming, design, procurement support and construction administration to construct a new 250 bed, plus 25 additional swing space beds, forensic inpatient services building on the occupied Campus. The existing facility is comprised of numerous aging buildings several dating back to the 1930's with many code and life safety deficiencies. The Project will be constructed on OMH property just outside the existing secure fence allowing the existing facility to remain in operation during the course of construction. The Project will include ten (10), 25 bed inpatient wards, one (1) 25 bed swing space, and accompanying program space, food preparation, medical clinic, pharmacy, visiting space, admissions, safety, receiving, housekeeping and maintenance. The Project site will be developed on the Campus adjacent to the existing facility and will require new infrastructure for natural gas, water, sewer, electrical service, emergency electrical service, data telecom service, parking and roadway, secure perimeter fence and exterior recreation yards.

- Provision of a healthy, comfortable, and supportive environment for the occupants
- Energy modeling to inform design and budget
- Post Occupancy Evaluation period engagement for up to one year's duration with the intent of:
 - Confirming energy and usability performance goals
 - Implementing reasonable adjustments for performance improvements
 - Developing case studies and lessons learned documents to share
- Delineation of Extended Services Contracts will be required

2.2 Qualifications and Certification Requirements

- The Architectural/Engineering Firm shall have recent experience in renovating, designing, and constructing forensic hospitals, or other institutional buildings, that are similar in size, scope, schedule duration, and/or complexity.
- The Architectural/Engineering Firm or team members shall have a demonstrated history of work on low-energy buildings and/or buildings achieving a high-performing certificate such as LEED, Passive House, Living Building Challenge and Well. Demonstrated expertise in Building Science is of value.
- The Architectural/Engineering Firm shall demonstrate its experience with respect to meeting goals for Minority and Women Owned Business (“M/WBE”) participation through design.
- The Architectural/Engineering Firm shall demonstrate its experience with, or plans for meeting goals for Service Disabled Veteran-Owned Business (“SDVOB”) participation through design.
- The appropriate team member(s) of the Architectural/Engineering Firm performing the required engineering and architectural services for the Project must possess a Certificate of Authorization (for Engineering Firms) and Professional Licensure and Registration to provide professional services in New York State from the State Education Department.

2.3 Freedom of Information Law and Public Disclosure

This RFQ and all information submitted in response to this RFQ constitute “records” subject to disclosure pursuant to the New York State’s Freedom of Information Law (Public Officers Law, Article 6, § 84-90, the “FOIL Law” or “FOIL”). DASNY is required to make its records available for public inspection or copying, except to the extent that those records fall within one or more grounds for denial set forth in §87(2) of the FOIL Law. DASNY may deny access to parts of an SOQ and/or parts of a successful Architectural/Engineering Firm Architectural/Engineering Firm contract (that Architectural/Engineering Firm may consider to “trade secrets”) if disclosure would cause

substantial injury to the competitive position of the subject enterprise. It is the responsibility of the firm to consult an attorney with any questions they have regarding this Law.

2.4 Confidentiality

Disclosure of Information: The Architectural/Engineering Firm, including all of its individual team members, their respective employees, and any proposed subcontractors or subconsultants shall not disclose any information received in conjunction with this RFQ or a subsequently issued RFP from DASNY, or any of other involved New York State agency, to any other person or entity, except to the extent necessary to allow the Architectural/Engineering Firm to respond to this RFQ. Any work product will be the property of DASNY, and such work product shall not to be disclosed without DASNY's consent.

If shortlisted, the Architectural/Engineering Firm, including all of its team members, and any identified subconsultants, subcontractors, and vendors shall, prior receiving the RFP, be required execute a Non-Disclosure Agreement, which such form shall be provided upon the confirmation of the final shortlist of Teams.

Section 3 - Content of Statement of Qualifications:

3.1 Information to be Provided by Architectural/Engineering Firm in the SOQ

The following is a list of required information that must be provided by each Architectural/Engineering Firm in response to this RFQ. Provide your response in the same order in which it is requested using numbered side tabs that correspond with each of the numbered tabs below. Your SOQ must contain sufficient information to assure DASNY of its accuracy.

The use of marketing or public relations materials commonly used in sales presentations is not desirable. Such materials should only be submitted as addenda to the relevant information.

Tab 1. **Transmittal Letter** including the following items:

- a. The contact name, title, telephone number, fax number and email address of the individual for the Architectural/Engineering Firm who will be DASNY's primary contact concerning this RFQ.
- b. The primary contact name, title, telephone number, fax number and email address for each team member that will perform work under the contract.
- c. A statement to the effect that the Architectural/Engineering Firm is willing to complete the Project Scope of Work as identified in Section 2.1, above, and will abide by the terms of this RFQ, including all attachments.
- d. The transmittal letter must be signed by the individual(s) authorized to contractually bind the Architectural/Engineering Firm. Indicate the title or position that the signer holds for the Architectural/Engineering Firm. DASNY reserves the right to reject an SOQ that contains an unsigned transmittal letter.
 - (1) If the Architectural/Engineering Firm is a corporation or limited liability company, the SOQ and transmittal letter shall be signed in the name and under the seal of the corporation by a duly authorized officer of the corporation or manager of the company, with the designation of his/her official capacity, and properly attested. The SOQ and transmittal letter shall show the state in

which the corporation is chartered. If it is a foreign corporation, the SOQ shall show whether or not the Architectural/Engineering Firm is licensed to transact business in the State of New York.

- (2) If the Architectural/Engineering Firm is a firm or partnership, the SOQ and transmittal letter shall be signed in the name or style under which the organization is doing business and by the partner, proper officer, or officers whose official capacity shall be designated. The name and address of each member of the organization shall be shown on the SOQ and transmittal letter.
- (3) If the Architectural/Engineering Firm is a joint venture, the SOQ and transmittal letter shall be signed by each of the persons or firms that is or will be a party to the Joint Venture Agreement. A certified copy of the Joint Venture Agreement shall be attached to the SOQ and transmittal letter.

In every case, the SOQ and transmittal letter shall show the present business address of the Architectural/Engineering Firm at which address communications shall be received and service of notices accepted. Anyone signing the SOQ as an agent shall file with it, legal evidence of his or her authority to execute such SOQ.

Tab 2. Architectural/Engineering Firm Experience (10 Page Limit)

- a. Provide Architectural/Engineering Firm and its team members' specialized experience and competence in projects of forensic behavioral health facilities.
- b. Provide Architectural/Engineering Firm and its team members' specialized experience and competence in projects that involve high performance and/or low-energy solutions for institutional buildings, including those that are similar or equivalent to the Project.
- c. Provide information describing the Architectural/Engineering Firm and the Architectural/Engineering Firm team members' involvement in significant projects valued over \$200 million. Include the project name, location, date, type of project, budget, design and construction durations, and a contact name with telephone number who is familiar with each identified project. Identify which of the Architectural/Engineering Firm team members were involved and their role on the identified projects. For those projects identified, please highlight the following:
 - Projects illustrating experience in forensic behavioral health design and construction
 - Projects where LEED or any other high-performance certification was achieved
 - Projects designing and/or collaborating with innovative construction techniques such as panelized manufacturing processes, or using any off-site construction methodologies
 - Projects incorporating onsite energy generation capabilities
- d. Provide Architectural/Engineering Firm and its team members' ability and approach in engagement in a post occupancy evaluation/commissioning (POE/Cx) process of up to at least one year's duration as well as the Architectural/Engineering Firm experience with POE/Cx.
- e. Provide Architectural/Engineering Firm and its team members' ability and approach in using energy modeling to inform design development.

Tab 3. **Architectural/Engineering Firm Organization and Responsibilities (5 Page Limit)**

- a. Describe the proposed Architectural/Engineering Firm for the design, procurement support, and construction portions of the Project, including the individual team member entities, the overall Architectural/Engineering Firm organization, and the responsibility of each team member. Indicate the person(s) with training and experience in forensic hospital and behavior health and the facilitation of iterative design meetings. Include an organizational chart that shows the relationships between the identified team members.
- b. Indicate how NYS Certified MWBE and NYS Certified SDVOB businesses will be incorporated into the design phase of the Project.
- c. Provide resumes of the key individuals working for the team members of the Architectural/Engineering Firm.
- d. Provide any other information that may be relevant to display expertise and experience in developing forensic behavior health projects.

Tab 4. **M/WBE and SDVOB Approach**

DASNY contributes to the economic development of New York State by assisting and supporting Minority and Women Owned Business Enterprises and Service Disabled Veteran-Owned Businesses (MWBE/SDVOB) through its procurement process. As part of this RFQ, and consistent with Article 15A and 17B of the Executive Laws, DASNY strongly encourages all firms to submit proposals that utilize partnerships, joint ventures, or sub-consultant arrangements with New York State certified MWBE & SDVOB firms for this procurement. To identify NYS Certified MWBE firms contact Empire State Development at www.esd.ny.gov/doing-business-ny/mwbe, for NYS Certified SDVOB firms contact www.ogs.ny.gov/veterans or for further assistance review DASNY MWSBE Registry at www.dasny.org.

Please note that while no final determination has been made at this stage, the aspirational goals for the proposed contract are 18% MBE, 12% WBE and 6% SDVOB. The goals refer to the percentage of utilization of your M/WBE and SDVOB sub-consultants. Explain Architectural/Engineering Firm anticipated approach to maximizing M/WBE and SDVOB participation in both the design and construction phases of the Project and provide summaries showing the Architectural/Engineering Firm and the team members' performance meeting M/WBE and SDVOB goals on past projects.

Tab 5. **Diversity Questionnaire**

Provide a completed Diversity Questionnaire, included in this RFQ as an attachment. It is the goal of DASNY to use qualified firms that have a demonstrated history of hiring, training, developing, promoting, and retaining minority and women staff and to encourage participation by certified MWBE firms. This questionnaire elicits information about each responding firm to verify that its work environment demonstrates a strong commitment to diversity and diversity inclusion in the Architectural/Engineering Firm project management design and construction team.

Tab 6. **Licenses and Certifications**

Provide license numbers or copies of registration certificates for the Architectural/Engineering Firm and each of the team members, as appropriate, indicating that the identified entities are licensed to do business in the State of New York and/or provide written assurances that the identified entities will be so licensed prior to the submission of any proposal in response to the subsequent-issued RFP. For Engineering Firms, include a copy of the Certificate of Authorization to provide engineering services in New York State.

Tab 7. **Trade Secrets and Proprietary Information**

Should you feel the submitted SOQ in response to this RFQ contains any trade secrets, confidential, or proprietary information, or that portions of the SOQ is otherwise exempt from disclosure pursuant to FOIL, you must submit a request to exclude such information from disclosure. Such request must detail the information that should be exempt, and the reason such information should be exempt. DASNY will not honor any attempt, by a firm, to omit its entire SOQ from disclosure.

3.2 **Provide the following forms in a separate envelope, and do not include them in your Statement of Qualifications.**

- NYS Vendor Responsibility Questionnaire

A NYS Vendor Responsibility Questionnaire (the “VRQ”) is included in this RFQ as an attachment and shall be completed by the Architectural/Engineering Firm for submission with its SOQ as a separate document. **DASNY encourage that all entities file the required Questionnaire online via the New York State VendRep System and only provide a copy of the certification page to DASNY.** To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <http://www.osc.state.ny.us/vendrep/index.htm> or go directly to the VendRep System online at <https://portal.osc.state.ny.us>.

Pursuant to Executive Order No. 170.1 – Uniform Guidelines for Responsibility Determinations, Executive Order No. 125 – NYS Vendor Responsibility Questionnaire and Executive Order No. 192 – Continuing Vendor Integrity, DASNY may only award a contract to a responsible proposer. A responsible proposer must have the integrity to justify the award of public dollars and the capacity to fully perform the requirements of the contract. The proposer must file a vendor responsibility questionnaire with DASNY. The questionnaire provides the proposer an opportunity to self-disclose any issues and provide necessary information, which DASNY will use as part of its determination.

- Procurement Lobbying Law – Certification

Section 4 - Evaluation of the SOQ:

Architectural/Engineering Firms will be evaluated on their ability to meet the requirements as detailed in this RFQ. DASNY will perform an evaluation based on the Architectural/Engineering Firm written response, internal and external references, and, if requested by DASNY, interviews and/or presentations. After the evaluation of written responses, additional information may be requested.

4.1 Preliminary Review

Upon receipt, SOQs shall be reviewed for conformance to the RFQ instructions regarding organization, format, and responsiveness to the requirements of the RFQ. Any Architectural/Engineering Firm that is deemed to have provided a non-responsive or unresponsive SOQ may not be eligible to be shortlisted and may not be scored.

DASNY reserves the right to reject any SOQ in its sole and absolute discretion. Any one or more of the following causes may be considered sufficient for the rejection of an Architectural/Engineering Firm's SOQ regardless of the Architectural/Engineering Firm's qualifications, with respect to the other evaluation criteria set forth in Section 3:

- Evidence of collusion among Architectural/Engineering Firms
- Non-responsibility as determined by DASNY in its sole judgment and discretion
- Default or arrearage on any contract or obligation with DASNY or other governmental entity, including debt contract, as surety or otherwise
- Submission of an SOQ that is incomplete, conditional, ambiguous, obscure, or containing alterations or irregularities of any kind
- Evidence of improper lobbying efforts toward members of DASNY and/or officers or employees of DASNY
- Failure to comply with the terms and conditions of this RFQ

Additionally, DASNY reserves the sole right to accept any SOQ that it feels best meets its requirements. DASNY reserves the right to waive any irregularity, informality, or non-compliance in information received.

DASNY reserves the right to reject and return to the Architectural/Engineering Firm any SOQ or other information received after the RFQ due date and time. Incomplete SOQs may also be rejected.

4.2 Evaluation

4.2.1 Evaluation Committee

The Architectural/Engineering Firm's SOQ will undergo an evaluation process conducted by an Evaluation Committee. The Evaluation Committee will evaluate the SOQs based upon the criteria for selection as set forth in this RFQ. Selection of the successful Architectural/Engineering Firm to the RFP is contingent on reaching an agreement on contract negotiations.

4.2.2 Evaluation Review

The criteria identified in this Section 4.2.2 will be used by the Evaluation Committee in reviewing the SOQs in order to achieve the desired shortlist of Architectural/Engineering Firms. All of the identified criteria are significant and are listed below.

- Architectural/Engineering Firms Organization and Responsibilities
- Architectural/Engineering Firms Relevant Experience
- Architectural/Engineering Firm Key Personnel, Organization, and Processes, including M/WBE and SDVOB Participation, Approach, and Experience

Section 5 - Submission of Statement of Qualifications:

5.1 Submission of Statement of Qualifications

One (1) hard copy in a three-ring binder, containing an electronic copy of your SOQ stored on a thumb-drive/flash drive. Ten (10) additional bound copies. The Architectural/Engineering Firm's full submission shall be submitted on or before 5:00 p.m. on July 16, 2019 to:

Stacie Bennett
RFP Coordinator
DASNY
515 Broadway
Albany, New York 12207-2964

Architectural/Engineering Firm are encouraged to submit environmentally-friendly SOQs.

Section 6 - Important Information Affecting Architectural/Engineering Firms:

6.1 Statement of Qualifications Requirements

1. All inquiries regarding this RFQ should be addressed to the following individual:

Stacie Bennett
Email: RFPAdministrator@dasny.org

All questions must be submitted by email to the RFP Administrator by June 21, 2019, at 5:00 p.m. E.S.T. to be considered by DASNY, and are to be resolved prior to the submission of a response to this RFQ. A list of all substantive inquiries received with relevant responses will be posted on DASNY's website at www.dasny.org. Architectural/Engineering Firms are solely responsible for obtaining all such interpretations and supplemental instructions that have been issued.

2. An Architectural/Engineering Firm may withdraw an SOQ any time prior to the final due date and time by written notification, signed by an authorized agent, to the contact person identified in Section 5.1, above. The SOQ may thereafter be resubmitted, but not after the final due date and time. Modifications offered in any other manner, oral or written, will not be considered.
3. If an Architectural/Engineering Firm discovers an ambiguity, conflict, discrepancy, omission or other error in this RFQ, the Architectural/Engineering Firm should immediately notify the contact person identified in Section 5.1, above. Notice of such error or omission should be submitted prior to the final due date and time for submission of SOQs. Modifications shall be made by addenda to this RFQ.
4. If an Architectural/Engineering Firm fails to notify DASNY of a known error or an error that reasonably should have been known, prior to the final due date and time for submission of SOQs, the Architectural/Engineering Firm shall assume the risk of proposing. If awarded the contract, the Architectural/Engineering Firm shall not be entitled to additional compensation or time by reason of the error or its late correction.
5. An Architectural/Engineering Firm indicates its acceptance of the provisions and conditions enumerated in this RFQ by submitting an SOQ.

6.2 DASNY Requirements

1. By submitting an SOQ, the Architectural/Engineering Firm covenants that the Architectural/Engineering Firm will not make any claims for or have any right to damages because of any misinterpretation or misunderstanding of the specifications or because of lack of information.
2. Issuance of this RFQ, your submission of an SOQ in response, and the evaluation of your SOQ by DASNY does not commit DASNY to award a contract. Only the execution of a written agreement between DASNY and the successful Architectural/Engineering Firm following the subsequent-issued RFP and RFP evaluation period will obligate DASNY in accordance with the terms and conditions contained in such agreement.
3. This RFQ does not commit or obligate DASNY to pay any expenses incurred by the Architectural/Engineering Firm in the preparation of its response. All such expenses are solely at the risk of the Architectural/Engineering Firm. By submitting a response, the Architectural/Engineering Firm agrees that all responses, and associated documents, to this RFQ shall become the property of DASNY.
4. Communications made to internal DASNY employees other than the contact listed in Section 5.1 about this process may be subject the Architectural/Engineering Firm to disqualification.

6.3 DASNY Rights and Prerogatives

DASNY reserves the right to exercise the following prerogatives:

1. To accept or reject any or all SOQs and amend, modify, or withdraw this RFQ.
2. To change the final due date and time for SOQs.
3. To accept or reject any of the Architectural/Engineering Firm's employees or proposed sub-consultants assigned to provide services on this Project and to require their replacement at any time. The Architectural/Engineering Firm shall obtain the written approval of DASNY of changes to the SOQ after it is submitted, including any changes with respect to sub-consultants. DASNY shall have the right to reject any proposed change to the Architectural/Engineering Firm SOQ.
4. DASNY reserves the sole right to accept any response to this RFQ that DASNY believes best meets its requirements. DASNY reserves the right to waive any irregularity, informality, or non-compliance in information received. This will in no way modify the RFQ documents or excuse the Architectural/Engineering Firm from full compliance with its requirements.
5. DASNY reserves the right to share any information as necessary with its employees, subject matter experts, consultants, representatives, and its partners including, but not limited to, Office of Mental Health.
6. To consider modifications to SOQs at any time before the shortlist is announced, if such action is in the best interest of DASNY.
7. To interview Architectural/Engineering Firms prior to shortlisting.

8. To reject any SOQ containing false or misleading statements or that provides references that do not support an attribute or condition claimed by the Architectural/Engineering Firm.
9. To shortlist firms as DASNY feels necessary to advance this procurement.

SECTION 7 - ATTACHMENTS

ATTACHMENT 1
DIVERSITY QUESTIONNAIRE

(I) Company Demographic Profile

Job Categories	Number of Employees (report employees in only one category)															Overall Totals
	Race/Ethnicity															
	Hispanic or Latino		Non-Hispanic or Latino													
			Male						Female							
	Male	Female	White	Black or African-American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races	White	Black or African-American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races		
Executive/ Senior Level Officials and Managers																
First / Mid-Level Officials and Managers																
Professionals																
Technicians																
Sales Workers																
Administrative Support Workers																
Craft Workers																
Operatives																
Laborers and Helpers																
Service Workers																
Total																

(NOTE: proposers can also attach Employer Information Reports EEO-1 for the last 3 years)

(II) MWBE Certification Status

1. Is your company certified as a Minority and/or Woman-owned business enterprise with New York State Empire State Development? Yes or No
If yes, provide a copy of your certification.
2. If no, list all other jurisdictions and/or certifying bodies that have deemed your company Minority and/or Woman-owned. Also, provide a copy of each certification.
3. If your company has applied for, but has not, as of the issuance of the RFP, been certified as a Minority or Women-owned business enterprise by New York State Empire State Development, you must submit proof of a pending application, including the filing date.

(III) Demographic Profile of Staff Assigned to this Engagement

Job Categories	Number of Employees (report employees in only one category)															Overall Totals
	Race/Ethnicity															
	Hispanic or Latino		Non-Hispanic or Latino							Female						
	Male	Female	White	Black or African-American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races	White	Black or African-American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or More Races		
Executive/ Senior Level Officials and Managers																
First / Mid-Level Officials and Managers																
Professionals																
Technicians																
Sales Workers																
Administrative Support Workers																
Craft Workers																
Operatives																
Laborers and Helpers																
Service Workers																
Total																

(IV) EEO Firm Activity

1. Is your company’s CEO or Chief Procurement Officer (“CPO”) committed to and engaged in the process of diversity business development? Yes or No
If yes, attach a signed statement from your CEO or CPO.
2. Provide a copy of your company’s equal opportunity and affirmative action policy.

ATTACHMENT 2

USE OF SERVICE-DISABLED VETERAN-OWNED BUSINESS ENTERPRISES



Attachment

Use of Service-Disabled Veteran-Owned Business Enterprises In Contract Performance

Article 17-B of the Executive Law enacted in 2014 acknowledges that Service-Disabled Veteran-Owned Businesses (SDVOBs) strongly contribute to the economies of the State and the nation. As defenders of our nation and in recognition of their economic activity in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles. SDVOBs can be readily identified on the directory of certified businesses at:

http://ogs.ny.gov/Core/docs/CertifiedNYS_SDVOB.pdf

Bidders/proposers need to be aware that all authorized users of this contract will be strongly encouraged to the maximum extent practical and consistent with legal requirements of the State Finance Law and the Executive Law to use responsible and responsive SDVOBs in purchasing and utilizing commodities, services and technology that are of equal quality and

functionality to those that may be obtained from non-SDVOBs. Furthermore, bidders/proposers are reminded that they must continue to utilize small, minority and women-owned businesses consistent with current State law.

Utilizing SDVOBs in State contracts will help create more private sector jobs, rebuild New York State's infrastructure, and maximize economic activity to the mutual benefit of the contractor and its SDVOB partners. SDVOBs will promote the contractor's optimal performance under the contract, thereby fully benefiting the public sector programs that are supported by associated public procurements.

Public procurements can drive and improve the State's economic engine through promotion of the use of SDVOBs by its contractors. The State, therefore, expects bidders/proposers to provide maximum assistance to SDVOBs in their contract performance. The potential participation by all kinds of SDVOBs will deliver great value to the State and its taxpayers.

Bidders/proposers can demonstrate their commitment to the use of SDVOBs by responding to the questions below:

Are you a bidder/proposer that is a NYS-certified SDVOB? Yes No If yes, what is your DSDVBD Control #?

Will NYS-certified SDVOBs be used in the performance of this contract? Yes No

If yes, identify the NYS-certified SDVOBs that will be used below (if more than 4 identified, please attach an additional form):

NYS-Certified SDVOB 1:

Name

Address

Control # Contract # Total % Work Performed \$ Amount

Nature of Participation

NYS-Certified SDVOB 2:

Name

Address

Control # Contract # Total % Work Performed \$ Amount

Nature of Participation

NYS-Certified SDVOB 3:

Name

Address

Control # Contract # Total % Work Performed \$ Amount

Nature of Participation

NYS-Certified SDVOB 4:

Name

Address

Control # Contract # Total % Work Performed \$ Amount

Nature of Participation

Contractor will report on actual participation by each SDVOB during the term of the contract on a semi-annual basis to the Office of General Services Division of Service-Disabled Veterans' Business Development. See <http://ogs.ny.gov>

NOTE: Information about set asides for SDVOB participation in public procurement can be found at: <http://www.ogs.ny.gov/Core/SDVOBA.asp>, which provides guidance for State agencies in making determinations and administering set asides for procurements from SDVOBs.

ATTACHMENT 3

PROCUREMENT LOBBYING LAW – CERTIFICATION

PROCUREMENT LOBBYING LAW – CERTIFICATION

The bidder/proposer shall submit this form at time of bid (or with RFP).

The bidder/proposer must check all applicable boxes.

A. Bidder/proposer affirmation relating to procedures governing permissible contacts

1. The bidder/proposer: affirms does not affirm

that it understands and has to date and agrees hereinafter to comply with DASNY’s procedures relative to permissible contacts for this procurement as required by State Finance Law § 139-j (3) and § 139-k (6) (b).

B. Bidder/proposer disclosure of findings of non-responsibility and prior contract terminations or withholdings under the Procurement Lobbying Law

1. Has any “governmental entity,” as defined in State Finance Law § 139-j and § 139-k made a finding in the last four years that the bidder/proposer was not responsible?

No Yes

2. If yes, was the basis for any such finding(s) the intentional provision of false or incomplete information required by State Finance Law § 139-j and § 139-k, and/or the failure to comply with the requirements of State Finance Law § 139-j (3) relating to permissible contacts?

No Yes

3. If yes, provide details regarding each finding of non-responsibility below. (Attach additional pages, if necessary).

Governmental Entity: _____

Date of Finding: _____

Basis of Finding: _____

4. Has any “governmental entity” as defined in State Finance Law § 139-j and § 139-k terminated or withheld a procurement contract with the bidder/proposer due to the intentional provision of

PROCUREMENT LOBBYING LAW – CERTIFICATION

false or incomplete information required by such Laws and/or the failure to comply with the requirements of State Finance Law § 139-k(3) relating to permissible contacts?

No

Yes

5. If yes, provide details below. (Attach additional pages, if necessary).

Governmental Entity: _____

Date of Termination or Withholding of Contract: _____

Basis of Termination or Withholding of Contract:

C. Certification

The bidder/proposer acknowledges that intentional submission of false or misleading information may constitute a felony under Penal Law Section 210.40 or a misdemeanor under Penal Law Section 210.35 or Section 210.45, and may also be punishable by a fine of up to \$10,000 or imprisonment of up to five years under 18 U.S.C. Section 1001; and states that all information provided to DASNY with respect to State Finance Law § 139-j and § 139-k is complete, true and accurate.

(Officer's Signature)

(Date)

Firms Legal Name: _____

Print Officer's Name: _____

Title: _____

ATTACHMENT 4

NYS VENDOR RESPONSIBILITY QUESTIONNAIRE

NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY

You have selected the For-Profit Non-Construction questionnaire which may be printed and completed in this format or, for your convenience, may be completed online using the New York State VendRep System.

COMPLETION & CERTIFICATION

The person(s) completing the questionnaire must be knowledgeable about the vendor's business and operations. An owner or officer must certify the questionnaire and the signature must be notarized.

NEW YORK STATE VENDOR IDENTIFICATION NUMBER (VENDOR ID)

The Vendor ID is a ten-digit identifier issued by New York State when the vendor is registered on the Statewide Vendor File. This number must now be included on the questionnaire. If the business entity has not obtained a Vendor ID, contact the OSC Help Desk at ciohelpdesk@osc.state.ny.us or call 866-370-4672.

DEFINITIONS

All underlined terms are defined in the "New York State Vendor Responsibility Definitions List," found at www.osc.state.ny.us/vendrep/documents/questionnaire/definitions.pdf. These terms may not have their ordinary, common or traditional meanings. Each vendor is strongly encouraged to read the respective definitions for any and all underlined terms. By submitting this questionnaire, the vendor agrees to be bound by the terms as defined in the "New York State Vendor Responsibility Definitions List" existing at the time of certification.

RESPONSES

Every question must be answered. Each response must provide all relevant information which can be obtained within the limits of the law. However, information regarding a determination or finding made in error which was subsequently corrected is not required. Individuals and Sole Proprietors may use a Social Security Number but are encouraged to obtain and use a federal Employer Identification Number (EIN).

REPORTING ENTITY

Each vendor must indicate if the questionnaire is filed on behalf of the entire Legal Business Entity or an Organizational Unit within or operating under the authority of the Legal Business Entity and having the same EIN. Generally, the Organizational Unit option may be appropriate for a vendor that meets the definition of "Reporting Entity" but due to the size and complexity of the Legal Business Entity, is best able to provide the required information for the Organizational Unit, while providing more limited information for other parts of the Legal Business Entity and Associated Entities.

ASSOCIATED ENTITY

An Associated Entity is one that owns or controls the Reporting Entity or any entity owned or controlled by the Reporting Entity. However, the term Associated Entity does **not** include "sibling organizations" (i.e., entities owned or controlled by a parent company that owns or controls the Reporting Entity), unless such sibling entity has a direct relationship with or impact on the Reporting Entity.

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

STRUCTURE OF THE QUESTIONNAIRE

The questionnaire is organized into eleven sections. Section I is to be completed for the Legal Business Entity. Section II requires the vendor to specify the Reporting Entity for the questionnaire. Section III refers to the individuals of the Reporting Entity, while Sections IV-VIII require information about the Reporting Entity. Section IX pertains to any Associated Entities, with one question about their Officials/Owners. Section X relates to disclosure under the Freedom of Information Law (FOIL). Section XI requires an authorized contact for the questionnaire information.

I. LEGAL BUSINESS ENTITY INFORMATION

<u>Legal Business Entity Name</u> ¹	<u>EIN</u>	
Address of the <u>Principal Place of Business</u> (street, city, state, zip code)	<u>New York State Vendor Identification Number</u>	
	Telephone ext.	Fax
Email	Website	

Additional Legal Business Entity Identities: If applicable, list any other DBA, Trade Name, Former Name, Other Identity, or EIN used in the last five (5) years and the status (active or inactive).

Type	Name	EIN	Status

1.0 Legal Business Entity Type – Check appropriate box and provide additional information:

<input type="checkbox"/> <u>Corporation</u> (including <u>PC</u>)	Date of Incorporation
<input type="checkbox"/> <u>Limited Liability Company</u> (<u>LLC</u> or <u>PLLC</u>)	Date of Organization
<input type="checkbox"/> <u>Partnership</u> (including <u>LLP</u> , <u>LP</u> or <u>General</u>)	Date of Registration or <u>Establishment</u>
<input type="checkbox"/> <u>Sole Proprietor</u>	How many years in business?
<input type="checkbox"/> Other	Date Established

If Other, explain:

1.1 Was the <u>Legal Business Entity</u> formed or incorporated in New York State?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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¹All underlined terms are defined in the “New York State Vendor Responsibility Definitions List,” which can be found at www.osc.state.ny.us/vendrep/documents/questionnaire/definitions.pdf.

NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY

I. LEGAL BUSINESS ENTITY INFORMATION

If 'No,' indicate jurisdiction where Legal Business Entity was formed or incorporated and attach a Certificate of Good Standing from the applicable jurisdiction or provide an explanation if a Certificate of Good Standing is not available.

- United States State _____
- Other Country _____

Explain, if not available:

1.2 Is the Legal Business Entity publicly traded? Yes No

If "Yes," provide CIK Code or Ticker Symbol

1.3 Does the Legal Business Entity have a DUNS Number? Yes No

If "Yes," Enter DUNS Number

1.4 If the Legal Business Entity's Principal Place of Business is not in New York State, does the Legal Business Entity maintain an office in New York State? Yes No
 (Select "N/A," if Principal Place of Business is in New York State.) N/A

If "Yes," provide the address and telephone number for one office located in New York State.

1.5 Is the Legal Business Entity a New York State certified Minority-Owned Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), New York State Small Business (SB) or a federally certified Disadvantaged Business Enterprise (DBE)? Yes No

If "Yes," check all that apply:

- New York State certified Minority-Owned Business Enterprise (MBE)
- New York State certified Women-Owned Business Enterprise (WBE)
- New York State Small Business (SB)
- Federally certified Disadvantaged Business Enterprise (DBE)

1.6 Identify Officials and Principal Owners, if applicable. For each person, include name, title and percentage of ownership. Attach additional pages if necessary. If applicable, reference to relevant SEC filing(s) containing the required information is optional.

Name	Title	Percentage Ownership <i>(Enter 0% if not applicable)</i>

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

II. REPORTING ENTITY INFORMATION

2.0 The Reporting Entity for this questionnaire is:
 Note: Select only one.
 Legal Business Entity
Note: If selecting this option, “Reporting Entity” refers to the entire Legal Business Entity for the remainder of the questionnaire. (SKIP THE REMAINDER OF SECTION II AND PROCEED WITH SECTION III.)
 Organizational Unit within and operating under the authority of the Legal Business Entity
 SEE DEFINITIONS OF “REPORTING ENTITY” AND “ORGANIZATIONAL UNIT” FOR ADDITIONAL INFORMATION ON CRITERIA TO QUALIFY FOR THIS SELECTION.
Note: If selecting this option, “Reporting Entity” refers to the Organizational Unit within the Legal Business Entity for the remainder of the questionnaire. (COMPLETE THE REMAINDER OF SECTION II AND ALL REMAINING SECTIONS OF THIS QUESTIONNAIRE.)

IDENTIFYING INFORMATION

a) <u>Reporting Entity</u> Name	
Address of the <u>Primary Place of Business</u> (street, city, state, zip code)	Telephone ext.
b) Describe the relationship of the <u>Reporting Entity</u> to the <u>Legal Business Entity</u>	
c) Attach an <u>organizational chart</u>	
d) Does the Reporting Entity have a <u>DUNS</u> Number?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If “Yes,” enter <u>DUNS</u> Number	
e) Identify the designated manager(s) responsible for the business of the <u>Reporting Entity</u> . <i>For each person, include name and title. Attach additional pages if necessary.</i>	
Name	Title

INSTRUCTIONS FOR SECTIONS III THROUGH VII

For each “Yes,” provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). For each “Other,” provide an explanation which provides the basis for not definitively responding “Yes” or “No.” Provide the explanation at the end of the section or attach additional sheets with numbered responses, including the Reporting Entity name at the top of any attached pages.

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

III. LEADERSHIP INTEGRITY	
<i>Within the past five (5) years, has any current or former reporting entity official or any individual currently or formerly having the authority to sign, execute or approve bids, proposals, contracts or supporting documentation on behalf of the reporting entity with any government entity been:</i>	
3.0 <u>Sanctioned</u> relative to any business or professional permit and/or license?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.1 <u>Suspended, debarred, or disqualified</u> from any <u>government contracting process</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.2 The subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation for any business-related conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.3 Charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for: a) Any business-related activity; or b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
For each "Yes" or "Other" explain:	

IV. INTEGRITY – CONTRACT BIDDING	
<i>Within the past five (5) years, has the reporting entity:</i>	
4.0 Been <u>suspended</u> or <u>debarred</u> from any <u>government contracting process</u> or been <u>disqualified</u> on any government procurement, permit, license, concession, franchise or lease, including, but not limited to, <u>debarment</u> for a violation of New York State Workers' Compensation or Prevailing Wage laws or New York State Procurement Lobbying Law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.1 Been subject to a denial or revocation of a government prequalification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2 Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3 Had a low bid rejected on a <u>government contract</u> for failure to <u>make good faith efforts</u> on any <u>Minority-Owned Business Enterprise, Women-Owned Business Enterprise or Disadvantaged Business Enterprise</u> goal or <u>statutory affirmative action requirements</u> on a previously held contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.4 Agreed to a voluntary exclusion from bidding/contracting with a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.5 Initiated a request to withdraw a bid submitted to a <u>government entity</u> in lieu of responding to an information request or subsequent to a formal request to appear before the <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

V. INTEGRITY – CONTRACT AWARD	
<i>Within the past five (5) years, has the reporting entity:</i>	
5.0 Been <u>suspended</u> , cancelled or <u>terminated for cause</u> on any <u>government contract</u> including, but not limited to, a <u>non-responsibility finding</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No

NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY

5.1 Been subject to an <u>administrative proceeding</u> or civil action seeking specific performance or restitution in connection with any <u>government contract</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.2 Entered into a formal monitoring agreement as a condition of a contract award from a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

VI. CERTIFICATIONS/LICENSES

Within the past five (5) years, has the reporting entity:

6.0 Had a revocation, <u>suspension</u> or <u>disbarment</u> of any business or professional permit and/or license?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.1 Had a denial, decertification, revocation or forfeiture of New York State certification of <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> or federal certification of <u>Disadvantaged Business Enterprise</u> status for other than a change of ownership?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

VII. LEGAL PROCEEDINGS

Within the past five (5) years, has the reporting entity:

7.0 Been the subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.1 Been the subject of an indictment, grant of immunity, <u>judgment</u> or conviction (including entering into a plea bargain) for conduct constituting a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.2 Received any OSHA citation and Notification of Penalty containing a violation classified as <u>serious or willful</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.3 Had a <u>government entity</u> find a willful prevailing wage or supplemental payment violation or any other willful violation of New York State Labor Law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.4 Entered into a consent order with the New York State Department of Environmental Conservation, or received an enforcement determination by any <u>government entity</u> involving a violation of federal, state or local environmental laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.5 Other than previously disclosed: a) Been subject to fines or penalties imposed by <u>government entities</u> which in the aggregate total \$25,000 or more; or b) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

VIII. FINANCIAL AND ORGANIZATIONAL CAPACITY

8.0 Within the past five (5) years, has the <u>Reporting Entity</u> received any <u>formal unsatisfactory performance assessment(s)</u> from any <u>government entity</u> on any contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

NEW YORK STATE

**VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

VIII. FINANCIAL AND ORGANIZATIONAL CAPACITY

If "Yes," provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

8.1 Within the past five (5) years, has the Reporting Entity had any liquidated damages assessed over \$25,000? Yes No

If "Yes," provide an explanation of the issue(s), relevant dates, contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

8.2 Within the past five (5) years, have any liens or judgments (not including UCC filings) over \$25,000 been filed against the Reporting Entity which remain undischarged? Yes No

If "Yes," provide an explanation of the issue(s), relevant dates, the Lien holder or Claimant's name(s), the amount of the lien(s) and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

8.3 In the last seven (7) years, has the Reporting Entity initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending? Yes No

If "Yes," provide the bankruptcy chapter number, the court name and the docket number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Closed." Provide answer below or attach additional sheets with numbered responses.

8.4 During the past three (3) years, has the Reporting Entity failed to file or pay any tax returns required by federal, state or local tax laws? Yes No

If "Yes," provide the taxing jurisdiction, the type of tax, the liability year(s), the tax liability amount the Reporting Entity failed to file/pay and the current status of the tax liability. Provide answer below or attach additional sheets with numbered responses.

8.5 During the past three (3) years, has the Reporting Entity failed to file or pay any New York State unemployment insurance returns? Yes No

If "Yes," provide the years the Reporting Entity failed to file/pay the insurance, explain the situation and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

8.6 During the past three (3) years, has the Reporting Entity had any government audit(s) completed? Yes No

a) If "Yes," did any audit of the Reporting Entity identify any reported significant deficiencies in internal control, fraud, illegal acts, significant violations of provisions of contract or grant agreements, significant abuse or any material disallowance? Yes No

If "Yes" to 8.6 a), provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY

IX. ASSOCIATED ENTITIES <i>This section pertains to any entity(ies) that either controls or is controlled by the reporting entity. (See definition of “associated entity” for additional information to complete this section.)</i>	
9.0 Does the <u>Reporting Entity</u> have any <u>Associated Entities</u> ? Note: All questions in this section must be answered if the <u>Reporting Entity</u> is either: – An <u>Organizational Unit</u> ; or – The entire <u>Legal Business Entity</u> which controls, or is controlled by, any other entity(ies). If “No,” SKIP THE REMAINDER OF SECTION IX AND PROCEED WITH SECTION X.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.1 Within the past five (5) years, has any <u>Associated Entity Official</u> or <u>Principal Owner</u> been charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for: a) Any business-related activity; or b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If “Yes,” provide an explanation of the issue(s), the individual involved, his/her title and role in the <u>Associated Entity</u> , his/her relationship to the <u>Reporting Entity</u> , relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s).	
9.2 Does any <u>Associated Entity</u> have any currently undischarged <u>federal</u> , New York State, New York City or New York local government <u>liens</u> or <u>judgments</u> (not including UCC filings) over \$50,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If “Yes,” provide an explanation of the issue(s), identify the <u>Associated Entity</u> ’s name(s), <u>EIN(s)</u> , primary business activity, relationship to the <u>Reporting Entity</u> , relevant dates, the Lien holder or Claimant’s name(s), the amount of the <u>lien(s)</u> and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
9.3 Within the past five (5) years, has any <u>Associated Entity</u> :	
a) Been <u>disqualified</u> , <u>suspended</u> or <u>debarred</u> from any <u>federal</u> , New York State, New York City or other New York local <u>government contracting process</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) Been <u>suspended</u> , <u>cancelled</u> or <u>terminated for cause</u> (including for <u>non-responsibility</u>) on any <u>federal</u> , New York State, New York City or New York local <u>government contract</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d) Been the subject of an <u>investigation</u> , whether open or closed, by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> for a civil or criminal violation with a penalty in excess of \$500,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e) Been the subject of an indictment, grant of immunity, <u>judgment</u> , or conviction (including entering into a plea bargain) for conduct constituting a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g) Initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

IX. ASSOCIATED ENTITIES
*This section pertains to any entity(ies) that either controls or is controlled by the reporting entity.
(See definition of “associated entity” for additional information to complete this section.)*

For each “Yes,” provide an explanation of the issue(s), identify the Associated Entity’s name(s), EIN(s), primary business activity, relationship to the Reporting Entity, relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

X. FREEDOM OF INFORMATION LAW (FOIL)

10. Indicate whether any information supplied herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL). Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL.	<input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

If “Yes,” indicate the question number(s) and explain the basis for the claim.

XI. AUTHORIZED CONTACT FOR THIS QUESTIONNAIRE

Name	Telephone ext.	Fax
Title	Email	

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIR
FOR-PROFIT BUSINESS ENTITY**

Certification

The undersigned: (1) recognizes that this questionnaire is submitted for the express purpose of assisting New York State government entities (including the Office of the State Comptroller (OSC)) in making responsibility determinations regarding award or approval of a contract or subcontract and that such government entities will rely on information disclosed in the questionnaire in making responsibility determinations; (2) acknowledges that the New York State government entities and OSC may, in their discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; and (3) acknowledges that intentional submission of false or misleading information may result in criminal penalties under State and/or Federal Law, as well as a finding of non-responsibility, contract suspension or contract termination.

The undersigned certifies that he/she:

- is knowledgeable about the submitting Business Entity’s business and operations;
- has read and understands all of the questions contained in the questionnaire;
- has not altered the content of the questionnaire in any manner;
- has reviewed and/or supplied full and complete responses to each question;
- to the best of his/her knowledge, information and belief, confirms that the Business Entity’s responses are true, accurate and complete, including all attachments, if applicable;
- understands that New York State government entities will rely on the information disclosed in the questionnaire when entering into a contract with the Business Entity; and
- is under an obligation to update the information provided herein to include any material changes to the Business Entity’s responses at the time of bid/proposal submission through the contract award notification, and may be required to update the information at the request of the New York State government entities or OSC prior to the award and/or approval of a contract, or during the term of the contract.

Signature _____ of _____
 Owner/Official _____

Printed Name of Signatory _____

Title _____

Name of Business _____

Address _____

City, State, Zip _____

Sworn to before me this _____ day of _____, 20__;

_____ Notary Public

ATTACHMENT 5
NON-COLLUSION STATEMENT

ATTACHMENT 6
CODE OF BUSINESS ETHICS CERTIFICATION

CODE OF BUSINESS ETHICS – CERTIFICATION

The bidder (or Proposer) shall submit this form at time of bid (or with RFP).

A. Ethics Programs

1. DASNY, a public-benefit corporation, expects the highest degree of ethical business conduct by its employees and the many contractors, consultants and vendors with whom it interacts on behalf of its clients, bondholders and the people of the State of New York. DASNY, by mandate of its Board of Directors, administers a comprehensive corporate integrity program to ensure that, as public officers, DASNY employees at all levels perform their official duties consistent with the requirements of the *New York State Public Officers Law*; other applicable laws, rules, and regulations; and policies of DASNY.
2. DASNY encourages and supports a fair, open and honest business relationship with its contractors, consultants and vendors based on quality, service and cost. Moreover, DASNY believes that a “level playing field” in the marketplace can only be achieved through adherence to ethical business practices by all participants involved in the process.
3. To promote a working relationship with DASNY based on ethical business practices, contractors, consultants and vendors are expected to:
 - a. furnish all goods, materials and services to DASNY as contractually required and specified;
 - b. submit complete and accurate reports to DASNY and its representatives as required;
 - c. not seek, solicit, demand or accept any information, verbal or written, from DASNY or its representatives that provides an unfair advantage over a competitor;
 - d. not engage in any activity or course of conduct that restricts open and fair competition on DASNY-related projects and transactions;
 - e. not engage in any course of conduct with DASNY employees or representatives that constitutes a conflict of interest or creates the appearance of a conflict of interest;
 - f. not offer any unlawful gifts or gratuities to DASNY employees or representatives, or engage in bribery or other criminal activity; and
 - g. report to DASNY any activity by a DASNY employee or contractor, consultant or vendor of DASNY that is inconsistent with DASNY’s *Code of Business Ethics*.
4. DASNY encourages its contractors, consultants and vendors to advance and support ethical business conduct and practices among their respective directors, officers and employees, preferably through the adoption of corporate ethics awareness training programs and written codes of conduct. In addition to considering technical competence and financial stability, DASNY will consider the *corporate integrity* of all contractors, consultants and vendors prior to the awarding of contracts or issuing of purchase orders.

B. Conduct of DASNY Employees

DASNY employees are expected to conduct business with contractors, consultants and vendors in a fair, consistent and professional manner. DASNY’s Code of Business Ethics and Employee Conduct entitled *Serving Responsibly*, and other DASNY policies and procedures, guide the manner in which DASNY employees are required to interact with contractors, consultants and vendors. Additionally, the New York State Public Officers Law sets forth legal parameters within which DASNY employees must perform their official duties with respect to, among other things, conflicts of interest and the acceptance of gifts.

CODE OF BUSINESS ETHICS – CERTICATION

C. Limits on Gifts to DASNY Employees

1. Pursuant to Section 73(5) of the Public Officers Law, no person shall offer any gift having more than a nominal value to a DASNY employee under circumstances in which it:
 - a. could be reasonably inferred the gift was intended to influence the employee in the performance of his or her official duties; or
 - b. could reasonably be expected to influence the employee in the performance of his or her official duties; or
 - c. was intended as a reward for any official action on the part of the employee.
2. A gift is anything more than nominal in value, in any form, given to a DASNY employee. Gifts include, but are not limited to, money, service, loan, travel, lodging, meals, refreshments, entertainment, discount, forbearance or promise. Any firm or its agents, either doing business or seeking to do business with DASNY (contractors, consultants, vendors, etc.), is prohibited from directly or indirectly offering or giving any gifts, even gifts of nominal value, to DASNY employees as such gifts are deemed to be *per se* improper.
3. As is stated in the *Prohibited Interests* section of the Construction and Consultant Contract documents, violations of these gift provisions may be grounds for immediate contract termination and/or referral for civil action or criminal prosecution.

D. Employing Relatives of DASNY Employees

Although contractors, consultants and vendors may employ relatives of DASNY employees, DASNY must be made aware of such circumstances as soon as possible, preferably in writing, to ensure a conflict of interest situation does not arise. DASNY reserves the right to request that contractors, consultants and vendors modify the work assignment of a DASNY employee's relative where a conflict of interest, or the appearance thereof, is deemed to exist. Please be advised that DASNY employees are required to disclose information regarding the hiring of relatives by contractors, consultants and vendors and recuse themselves from matters that may present a conflict of interest. For purposes of this document, the term "relatives" refers to spouses, domestic partners, parents, children, sisters, brothers, sisters-in-law, brothers-in-law, parents-in-law, sons/daughters-in-law, stepparents, stepchildren, aunts, uncles, nieces, nephews, first cousins, grandparents by blood relationship or by marriage, or persons residing in the same household.

E. Hiring Former DASNY Employees

Contractors, consultants and vendors may hire former DASNY employees. However, as a general rule, former employees of DASNY may neither appear nor practice before DASNY, nor receive compensation for services rendered on a matter before DASNY, for a period of *two years* following their separation from DASNY service. In addition, former DASNY employees are subject to a "*lifetime bar*" from appearing before DASNY or receiving compensation for services regarding any transaction in which they personally participated or which was under their active consideration during their tenure with DASNY. Violations will be referred to the New York State Commission on Public Integrity for appropriate action.

CODE OF BUSINESS ETHICS – CERTIFICATION

F. Questions

Questions relating to these guidelines should be directed to the responsible DASNY Project Manager or Program Director, Director of Procurement, DASNY's Ethics Officer or Director of Internal Affairs. To contact any of these individuals please call: (518) 257-3000.

When in doubt, please seek guidance.

G. Certification

I have read the foregoing and agree to comply with DASNY's Code of Business Ethics. I further acknowledge that failure to comply shall justify contract termination by DASNY and may result in the rejection of bids or proposals for future work with DASNY.

_____ (Officer's Signature) _____ (Date)

Firm's Legal Name: _____

Print Officer's Name _____

Title _____

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