

**TECHNICAL (NON-PRICE) PROPOSAL RESPONSE FORM**

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To the Division of Capital Asset Management:

The undersigned proposes to furnish all Construction Management Services required by Massachusetts State Project No. [redacted] Construction Management Services for the [redacted]. In accordance with the Request for Proposals, all documents contained in the Request for Proposals or referred to therein, addenda or clarification's issued in regard to that RFP, namely the addenda numbered \_\_\_\_\_ and the proposal of the undersigned submitted herewith, for the price stated in a separate form, referencing the same project and submitted in a separate envelope.

The undersigned declares that he or she (or, if he or she is the authorized representative of a company, he or she and the company, herein collectively referred to as "undersigned" and "company") has carefully examined all the documents noted above and also the site where the proposed work is to be performed. The undersigned certifies that this offer fully complies with all of the requirements of the Request for Proposals. The undersigned hereby acknowledges that if selected it will be obligated to meet the MBE and WBE goals for the project and certifies that it will meet or exceed these goals.

The undersigned further certifies that if selected, it will within fifteen (15) or whatever number of days appears in the written notice required by Section 6, Paragraph 6.1 of the RFP, Saturdays, Sundays, and legal holidays excluded, after presentation thereof, execute a contract in accordance with the terms stated in the RFP, addenda thereto, documents referred to therein, and the proposal of the undersigned, and will furnish a performance bond and also a labor and materials or payment bond, from a surety licensed to do business in Massachusetts and whose name appears on the United States Treasury Department Circular 570, and each in the sum of the estimated value of the construction project, the premiums of which are to be paid by the undersigned and are included in the proposed price. The undersigned hereby certifies that it is able to furnish for any work at the site of installation labor that can work in harmony with all other elements of labor employed or to be employed on the work at the site of installation, and that it will comply fully with all laws and regulations applicable to the award of the contract for this work.

The undersigned also hereby certifies that it is the only person interested in this proposal; that it is made without any connection with any other person making any proposal for the same work: that no person acting for, or employed by, the Commonwealth of Massachusetts is directly or indirectly interested in this proposal, or in any contract which may be made under it, or in expected profits to arise therefrom; that the undersigned company has not influenced or attempted to influence any other person or corporation to file a proposal or to refrain from doing so or to influence the terms of the proposal of any other person or corporation; and that this proposal is made in good faith without collusion or connection with any other person bidding for the same work.

I certify, under the pains and penalties of perjury, that all of the above statements are true.

Firm Name: \_\_\_\_\_

By: \_\_\_\_\_  
*(Signature of Authorized Representative)*

Title: \_\_\_\_\_ Date: \_\_\_\_\_

## INFORMATIONAL SHEET

If a Corporation:

Incorporated in what State: \_\_\_\_\_

President: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Secretary: \_\_\_\_\_

If a foreign corporation, are you registered to do business in Massachusetts?

Yes \_\_\_\_\_ No \_\_\_\_\_

To be considered for Selection for this work, you are required under Massachusetts General Laws Ch. 30, Sec. 39L to obtain from the Secretary of State, Foreign Corporations Section, a certificate stating that your corporation is registered, and to furnish such certificate to DCAM prior to award of the contract.

If a partnership, name all partners on attached sheet.

If an individual:

Name: \_\_\_\_\_

Residence: \_\_\_\_\_

If an individual doing business under a firm name:

Name of Firm: \_\_\_\_\_

Business Address: \_\_\_\_\_

Name of Individual: \_\_\_\_\_

AFFIDAVIT OF COMPLIANCE

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\_\_\_\_\_ Massachusetts Business Corp.    \_\_\_\_\_ Foreign Corp.    \_\_\_\_\_ Non-Profit Corp.

I, \_\_\_\_\_, President \_\_\_\_\_ Clerk \_\_\_\_\_  
of \_\_\_\_\_

\_\_\_\_\_, principal office is located at \_\_\_\_\_

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I do hereby certify that the above named corporation has filed with the State Secretary all certificates and annual reports required by Chapter 156B Sec. 109 (business corporation), by Chapter 181, Sec. 4 (foreign corporation) or by Chapter 180, Sec. 26A (non-profit corporation) of the Massachusetts General Laws.

SIGNED UNDER THE PENALTIES OF PERJURY this \_\_\_\_\_ day of \_\_\_\_\_  
\_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Duly Authorized Corporate Officer

**AFFIDAVIT OF PREVAILING WAGE COMPLIANCE (C. 149, S. 26 AND 27)**

I, \_\_\_\_\_, \_\_\_\_\_, of the  
Name Title

\_\_\_\_\_, with a principal office is located at \_\_\_\_\_  
Offeror's Company Name

do hereby certify that the above named corporation will comply with the prevailing wage laws as set forth in Sections 26 and 27 of the Massachusetts General Laws.

SIGNED UNDER THE PENALTIES OF PERJURY this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Duly Authorized Corporate Officer

CERTIFICATION OF TAX COMPLIANCE

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COMMONWEALTH OF MASSACHUSETTS  
DIVISION OF CAPITAL ASSET MANAGEMENT

Pursuant to M.G.L. Ch. 62c. sec. 49a.

I, \_\_\_\_\_,

President, \_\_\_\_\_, Clerk, \_\_\_\_\_, Partner, of

\_\_\_\_\_, \_\_\_\_\_, hereby

certify under penalties of perjury that \_\_\_\_\_ has, to my

best knowledge and belief, filed all state tax returns and paid all state taxes required under

law.

\_\_\_\_\_  
Federal Identification Number  
or Social Security Number

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Duly Authorized (type/print)

\_\_\_\_\_  
Title/Company Position

**AFFIDAVIT OF COMPLIANCE WITH UPDATE OF SCHEDULE "E"  
TERMINATIONS AND LEGAL PROCEEDINGS**

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I, \_\_\_\_\_, \_\_\_\_\_, of the  
Name Title  
\_\_\_\_\_, with a principal office is located at \_\_\_\_\_  
Offeror's Company Name

\_\_\_\_\_, do hereby certify that attached hereto is a copy of Offeror's Schedule "E" Terminations and Legal Proceedings, **that was submitted to DCAM by Offeror with Offeror's Qualification Statement** in connection with this Project. I further certify that (check one of the following):

1. \_\_\_\_\_ There are no updates to the attached Schedule "E".  
or
2. \_\_\_\_\_ There are updates to the attached Schedule "E" for items that occurred on or after the date that Offeror submitted its Qualification Statement. The update(s) are as follows:

**Part A. Terminations, Incomplete Projects, Liquidated Damages Paid**

Provide all updated or changed information with respect to information provided on Schedule "E" and attach additional sheets if necessary.

**Part B. Convictions and Fines**

Provide all updated or changed information with respect to information provided on Schedule "E" and attach additional sheets if necessary.

**Part C. Legal Proceedings**

Provide all updated or changed information with respect to information provided on Schedule "E" and attach additional sheets if necessary.

Section 1. Litigation

Section 2. Administrative Proceedings

Section 2. Arbitrations

SIGNED UNDER THE PENALTIES OF PERJURY this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Duly Authorized Corporate Officer

**ATTACH SCHEDULE "E" TO THIS AFFIDAVIT**

**ADDITIONAL FORMS**

**PLEASE SUPPLY THE FOLLOWING WITH THE NON-PRICE SUBMISSION**

- Copy of the Offeror's Certificate of Eligibility
- Surety Commitment Letter at 110% of Estimated Construction Cost
- Completed Prime/General Contractor Update Statement (Blank form is attached)
- Copy of the Offeror's Schedule "E: Terminations and Legal Proceedings that was submitted with Offeror's RFQ on this Project