BLACK HORSE PIKE REGIONAL SCHOOL DISTRICT BOARD OF EDUCATION REQUESTS FOR PROPOSALS

Notice is hereby given that pursuant to the provisions of N.J.S.A. 19:44A-20, New Jersey Pay to Play, and other legislative enactments, more specifically Chapter 271 of the laws of the State of New Jersey, the Black Horse Pike Regional School District Board of Education located at 580 Erial Road, Blackwood, New Jersey 08012 is seeking RFP's for professional services to be provided to the Board of Education as listed below for the period July 1, 2025 to June 30, 2026.

Requests for proposals as attached, are on file at the Board Secretary/Business Administrator's office at 580 Erial Road, Blackwood, New Jersey 08012, and may also be downloaded from the Board of Education's website.

ARCHITECT

Scope of Services:

The Black Horse Pike Regional Board of Education desires to appoint a firm to provide architectural services to the Board. Applicants should demonstrate knowledge and experience with respect to all aspects of architectural services required by a school board. Any experience or knowledge of matters that directly affect the Board of Education should be addressed.

Mandatory Minimum Qualifications:

- 1. Must be certified to provide architectural services in the State of New Jersey.
- 2. Must have a minimum of ten (10) years' experience in providing architectural services to boards of education.
- 3. Must be experienced in obtaining permits and approvals from various state, county, and local regulatory agencies.
- 4. Must maintain a staff of New Jersey licensed or certified professionals sufficient to service the Board of Education including, but not limited to civil engineers, land surveyors, planners, environmental scientists and construction clerks.
- 5. Must maintain a principal office location in close proximity to the Board of Education so as to be able to respond to emergent matters promptly.
- 6. Must be experienced in the preparation of grant applications.
- 7. Must have project managers with at least ten (10) years of school board experience.
- 8. Must list past and present school boards served as consulting architect.
- 9. Must provide hourly billing rates for employees possibly assigned to service the Board of Education.

All statements of proposals for professional service contracts shall include at a minimum the following information.

- 1. Names of individuals who will perform required tasks as well as the listing of their licenses.
 - A. Identify the person who will be primarily responsible for the services required by the Board of Education and provide a description of the experience of the primary person with projects and issues similar to those more specifically set forth in this RFP's and on behalf of the Board of Education of the Black Horse Pike Regional School District.
 - B. Identify persons who will serve as back up to the primary person including resumes of all parties.
- 2. Describe ability to provide services in a timely fashion including a description of your staffing and a description of your familiarity with the services required by the Board of Education of the Black Horse Pike Regional School District.

Evaluation of Proposals:

The School District intends to award a professional services contract for the defined scope of work under the Fair and Open Process in accordance with N.J.S.A. 19:44A-20.4 et seq.

The proposals will be evaluated by a committee of School District staff based upon information supplied by each Proposer in response to this RFP and the following criteria:

- Ability to meet all minimum qualifications.
- Overall knowledge and familiarity with the operations of the School District.
- Experience of the firm in providing similar services to other public bodies, with special emphasis on experience in New Jersey.
- Qualifications and experience of the professional.
- Qualifications and experience of the other members of the professional's firm.
- The hourly rates proposed. The proposal shall identify whether clerical and other overhead costs will be billed separately or included in the hourly labor rate for the professionals.

Any questions regarding this Request for Proposals should be directed to Scott Kipers, School Business Administrator of the Black Horse Pike Regional School District. Please submit two (2) copies of the proposal to:

Black Horse Pike Regional School District 580 Erial Road Blackwood, New Jersey 08012 856-227-4106

All RFP's must be received at the School District's Administrative Office by **Friday May 9, 2025** no later than 12:00 pm, at which time they will be publicly opened.

AFFIRMATIVE ACTION QUESTIONNAIRE

This form is to be completed and returned with the bid. However, the Board will accept in lieu of this Questionnaire, Affirmative Action Evidence Employee Information Report.

1. Our company has a federal Affirmative Action Plan approval.

If yes, please attach a copy of the plan to this questionnaire.

2. Our company has a N.J. State Certificate of Employee Information Report Yes No

If ves, please attach a copy of the certificate to this questionnaire.

3. If you answered "*NO*" to both questions No.1 and 2, you must apply for an Affirmative Action Employee Information Report - Form AA302.

Please visit the New Jersey Department of Treasury website for the Division of Public Contracts Equal Employment Opportunity Compliance: www.state.nj.us/treasury/contractcompliance/

- Click on "Employee Information Report"
- Complete and submit the form with the appropriate payment to:

Department of Treasury Division of Public Contracts/EEO Compliance P.O. Box 209 Trenton, NJ 08625-0002

All fees for this application are to be paid directly to the State of New Jersey. A copy shall be submitted to the Board of Education within seven (7) days of the notice of the intent to award the contract or the signing of the contract.

I certify that the above information is correct to the best of my knowledge.

Name		
Signature		••••••••••••••••••••••••••••••••••••••
Title	Date	
Name of Company		
Address		
City, State, Zip		

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP

Re: Proposal for the Black Horse Pike Regional Board of Education.

Proposal Date:_____

Please check one type of Ownership. complete the form. and execute where provided.

Corporation	Limited Partnership
Partnership	Limited Liability Corp
Sole Proprietorship	Limited Liability Partnership
Sub Chapter S Corp	Other

No corporation "or partnership" shall be awarded any contract nor shall any agreement be entered into for the performance of any work or the furnishing of any material or supplies, the cost of which is to be paid with or out of any public funds, by the State or any county, municipality or school district, or any subsidiary or agency of the State, or by an authority, board or commission which exercises governmental functions, unless prior to the receipt of the bid or accompanying the bid of said corporation or said partnership, there is submitted a statement setting forth the names and all individual partners in the partnership who own a 10% or greater interest therein, as the case may be." If one or more such stockholder "or partner" is itself a corporation "or partnership", the stockholder holding 10% or more of that corporation "or partnership" the individual partners owning 10% or greater interest in that partnership, as the case may be, shall also be listed. The disclosure shall be, continued until names and addresses of every non-corporate stockholder, and individual partner, exceeding the 10% ownership criteria established in this act, has been listed.

IT IS MANDATORY THAT THIS FORM BE COMPLETED AND SUBMITTED WITH BID. In the event that there are no persons who own ten percent or more of the stock or ownership of the bidder, then such fact should be certified below as part of this disclosure.

Name of Company_____

Address _____

City, State, Zip _____

List of Owners with Ten Percent (10%) or More Interest

Owner's Name	Home Address	Title/Office Held	Percent (%) of Partnership Shares Owned

NOTE: If you need more space than that provided above, please use an extra sheet for furnishing the above required information for any remaining persons or entities.

Signature

Date

(form continued on next page)

To be completed and signed below.

STOCKHOLDER/PARTNERSHIP DISCLOSURE AND STATEMENT OF OWNERSHIP (con't)

If your firm is not a corporation and/ or partnership, please explain below how your firm is organized and include a list of the various principals.

Our firm,	
Names of Principals Title	
Use additional paper if needed. Check here \Box if additional sheets are attached.	
Name of Company	
Address	
City, State, Zip	
Authorized Agent Title	

SIGNATURE OF AUTHORIZED AGENT

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Required Pursuant To N.J.S.A. 19:44A-20.26

This form or its permitted facsimile must be submitted to the local unit no later than 10 days prior to the award of the contract.

Part I - Vendor Information

Vendor Na	ame:		
Address:			
City:	State:	Zip:	

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.I.S.A. 19:44A-20.26 and as represented by the instructions accompanying this form.

	D 1 1 1 1	Title
Signature	Printed Name	The
orginatare		

Part II - Contribution Disclosure

Disclosure requirement: Pursuant to NJ.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$300 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

□ Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
			\$

□ Check here if the information is continued on subsequent page(s)

C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM Contractor Instructions

Business entities (contractors) receiving contracts from a public agency that are NOT awarded pursuant to a "fair and open" process (defined at N.J.S.A. 19:44A-20.7) are subject to the provisions of P.L. 2005, c. 271, s.2 N.J.S.A. 19:44A-20.26). This law provides that 10 days prior to the award of such a contract, the contractor shall disclose contributions to:

- any State, county, or municipal committee of a political party
- any legislative leadership committee*
- any continuing political committee (a.k.a., political action committee)
- any candidate committee of a candidate for, or holder of, an elective office:
 - of the public entity awarding the contract
 - o of that county in which that public entity is located
 - o of another public entity within that county
 - o or of a legislative district in which that public entity is located or, when the public entity is a county, of any legislative district which includes all or part of the county

The disclosure must list reportable contributions to any of the committees that exceed \$300 per election cycle that were made during the 12 months prior to award of the contract. See NJ.S.A. 19:44A-8 and 19:44A-16 for more details on reportable contributions.

NJ.S.A. 19:44A-20.26 itemizes the parties from whom contributions must be disclosed when a business entity is not a natural person. This includes the following:

· individuals with an "interest" ownership or control of more than 10% of the profits or assets of a business

- entity or 10% of the stock in the case of a business entity that is a corporation for profit
- all principals, partners, officers, or directors of the business entity or their spouses
- any subsidiaries directly or indirectly controlled by the business entity
- IRS Code Section 527 New Jersey based organizations, directly or indirectly controlled by
- the business entity and filing as continuing political committees, (PACs).

When the business entity is a natural person, "a contribution by that person's spouse or child, residing therewith, shall be deemed to be a contribution by the business entity." [N.J.S.A. 19:44A-20.26(b)] The contributor must be listed on the disclosure.

Any business entity that fails to comply with the disclosure provisions shall be subject to a fine imposed by ELEC in an amount to be determined by the Commission which may be based upon the amount that the business entity failed to report.

The enclosed list of agencies is provided to assist the contractor in identifying those public agencies whose elected official and/or candidate campaign committees are affected by the disclosure requirement. It is the contractor's responsibility to identify the specific committees to which contributions may have been made and need to be disclosed. The disclosed information may exceed the minimum requirement.

The enclosed form, a content-consistent facsimile, or an electronic data file containing the required details (along with a signed cover sheet) may be used as the contractor's submission and is disclosable to the public under the Open Public Records Act.

The contractor must also complete the attached Stockholder Disclosure Certification. This will assist the agency in meeting its obligations under the law. **NOTE: This section does not apply to Board of Education contracts.**

'N.J.S.A. 19:44A-3(s): "The term "legislative leadership committee" means a committee established, authorized to be established, or designated by the President of the Senate, the Minority Leader of the Senate, the Speaker of the General Assembly or the Minority Leader of the General Assembly pursuant to section 16 of P.L.1993, c.65 (C.19:44A-10.1) for the purpose of receiving contributions and making expenditures."

BLACK HORSE PIKE REGIONAL BOARD OF EDUCATION

Business Office 580 Erial Road Blackwood, New Jersey 08012

Proposal Form

Title of Proposal RFP - Architect

The respondent by signing this proposal form, acknowledges that he/she has carefully examined the proposal specifications and documents; and further acknowledges he/she understands and is able to render the scope of activity and services outlined in the proposal.

Name		
Address	P.O. Box	
City, State, Zip Code		
Federal Tax ID Number		
Phone Number ()	Extension	
Fax No. ()	E-Mail	
Authorized Agent	Title	
Agent's Signature	Date	

All proposals must be received no later than Friday, May 9, 2025 @ 12:00 pm. All proposals are to be sent to:

Mr. Scott Kipers, Business Administrator Board Secretary, Purchasing Agent 580 Erial Road Blackwood, New Jersey 08012 Phone # 856-227-4106/Fax # 856-401-8763

ETHICS IN PURCHASING

Statement to Vendors

School District Responsibility

Recommendation of Purchases

It is the desire of the Black Horse Pike Regional Board of Education to have all Board employees and officials practice exemplary ethical behavior in the procurement of goods, materials, supplies, and services.

School district officials and employees who recommend purchases shall not extend any favoritism to any vendor. Each recommended purchase should be based upon quality of the items, service, price, delivery, and other applicable factors in full compliance with N.J.S.A. 18A:18A-1 et.seq.

Solicitation/Receipt of Gifts - Prohibited

School district officials and employees are prohibited from soliciting and receiving funds, gifts, materials, goods, services, favors, and any other items of value from vendors doing business with the Black Horse Pike Regional Board of Education or anyone proposing to do business with the Black Horse Pike Regional School District.

Vendor Responsibility

Offer of Gifts, Gratuities -- Prohibited

Any vendor doing business or proposing to do business with the Black Horse Pike Regional School District, shall neither pay, offer to pay, either directly or indirectly, any fee, commission, or compensation, nor offer any gift, gratuity, or other thing of value of any kind to any official or employee of the Black Horse Pike Regional School District or to any member of the official's or employee's immediate family.

Vendor Influence -- Prohibited

No vendor shall cause to influence or attempt to cause to influence, any official or employee of the Black Horse Pike Regional School District, in any manner which might tend to impair the objectivity or independence of judgment of said official or employee.

Vendor Certification

Vendors or potential vendors will be asked to certify that no official or employee of the Black Horse Pike Regional Board of Education or immediate family members are directly or indirectly interested in this request or have any interest in any portions of profits thereof. The vendor participating in this request must be an independent vendor and not an official or employee of the Black Horse Pike Regional Board of Education.

Mr. Scott Kipers

Business Administrator Board Secretary Purchasing Agent

NON-COLLUSION AFFIDAVIT

STATE OF)	Date:	
COUNTY OF)		
I,	of the City of	
in the County of	and the State of	_
of full age, being duly sworn accordi	ing to law on my oath depose and say that:	
I am	De citien in Commune	of
the firm of	Position in Company	the bidder making
have not, directly or indirectly, enter of this proposal with any potential bi	ontract, and that I executed the said Proposal with full authorized into any agreement, participated in any collusion, discussidders, or otherwise taken any action in restraint of free, com	sed any or all parts
and correct, and made with full know truth of the statements contained in contract for the said bid. I further warrant that no person of upon an agreement or understanding	d, and that all statements contained in said Proposal and in the wledge that the Black Horse Pike Regional Board of Educat said Proposal and in the statements contained in this affidar or selling agency has been employed or retained to solicit or sa g for a commission, percentage, brokerage or contingent fee commercial or selling agencies maintained by	ion relies upon the vit in awarding the ecure such contrac
and correct, and made with full know truth of the statements contained in contract for the said bid. I further warrant that no person of upon an agreement or understanding	wledge that the Black Horse Pike Regional Board of Educat said Proposal and in the statements contained in this affida- or selling agency has been employed or retained to solicit or se g for a commission, percentage, brokerage or contingent fee	ion relies upon the vit in awarding the ecure such contrac
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To be completed, signed and returned with RFP Disclosure of Investment Activities in Iran

Person or Entity

Part 1: Certification

COMPLETE PART 1 BY CHECKING EITHER BOX.

Pursuant to Public Law 2012, c. 25, any person or entity that is a successful bidder or proposer, or otherwise proposes to enter into or renew a contract, must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any parent entity, subsidiary, or affiliate is identified on the State Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The list is found on Treasury's website at www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf.

The Chapter 25 list must be reviewed prior to completing the below certification. If a vendor or contractor is found to be in violation of law, action may be taken as appropriate and as may provided by law, rule or contract, including but not limited to imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

I certify, pursuant to Public Law 2012, c. 25, that neither the person or entity listed above, nor any parent entity, subsidiary, or affiliate thereof is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

I am unable to certify as above because the person or entity and/or a parent entity, subsidiary, or affiliate thereof is listed on the N.J. Department of the Treasury's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below sign and complete the Certification below.

Part 2: Additional Information

PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN.

You must provide a detailed, accurate and precise description of the activities of the person or entity, or a parent entity, subsidiary, or affiliate thereof engaging in investment activates in Iran below and, if more space is needed, on additional sheets provided by you.

Part 3: Certification of True and Complete Information

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments there to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity.

I acknowledge that the Black Horse Pike Regional School District is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the Black Horse Pike Regional School District to notify the Black Horse Pike Regional School District in writing of any changes to the answers of information contained herein.

I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the **Black Horse Pike Regional School District** and that the **Black Horse Pike Regional School District** at its option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print)	Title		
Signature		Date	



CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS

Pursuant to N.J.S.A. 52:32-60.1, et seq. (<u>L. 2022, c. 3</u>) any person or entity (hereinafter "Vendori") that seeks to enter into or renew a contract with a State agency for the provision of goods or services, or the purchase of bonds or other obligations, must complete the certification below indicating whether or not the Vendor is identified on the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, available here: <u>https://sanctionssearch.ofac.treas.gov/</u>. If the Department of the Treasury finds that a Vendor has made a certification in violation of the law, it shall take any action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

I, the undersigned, certify that I have read the definition of "Vendor" below, and have reviewed the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, and having done so certify:

(Check the Appropriate Box)

A. That the Vendor is not identified on the <u>OFAC Specially Designated Nationals and Blocked Persons list on</u> <u>account of activity related to Russia and/or Belarus</u>.

OR

B. That I am unable to certify as to "A" above, because the Vendor is identified on the <u>OFAC Specially</u> <u>Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus</u>.

OR

C. That I am unable to certify as to "A" above, because the Vendor is identified on the <u>OFAC Specially</u> and/or Belarus consistent with federal law, regulation, license or exemption. A detailed description of how the Vendor's activity related to Russia and/or Belarus is consistent with federal law is set forth below.

(Attach Additional Sheets If Necessary.)

Signature of Vendor's Authorized Representative	Date
Print Name and Title of Vendor's Authorized Representative	Vendor's FEIN
Vendor's Name	Vendor's Phone Number
Vendor's Address (Street Address)	Vendor's Fax Number
Vendor's Address (City/State/Zip Code)	Vendor's Email Address

ⁱ Vendor means: (1) A natural person, corporation, company, limited partnership, limited liability partnership, limited liability company, business association, sole proprietorship, joint venture, partnership, society, trust, or any other nongovernmental entity, organization, or group; (2) Any governmental entity or instrumentality of a government, including a multilateral development institution, as defined in Section 1701(c)(3) of the International Financial Institutions Act, 22 U.S.C. 262r(c)(3); or (3) Any parent, successor, subunit, direct or indirect subsidiary, or any entity under common ownership or control with, any entity described in paragraph (1) or (2).

BUSINESS REGISTRATION CERTIFICATE (N.J.S.A. 52:32-44)

Pursuant to N.J.S.A. 52:32-44 as amended by P.L. 2004 – Chapter 57, all respondents shall submit with their proposal package a copy of their "New Jersey Business Registration Certificate" as issued by the Department of Treasury of the State of New Jersey. Failure to provide the New Jersey Business Registration Certification with the proposal package, or prior to the award of contract, will be cause for the rejection of the entire proposal.

INSURANCE; PROFESSIONAL LIABILITY – CERTIFICATE REQUIRED

□ Required □ Not Required

The successful respondent to whom the contract is awarded shall provide to the Board of Education with contract documents a Professional Liability Insurance Certificate with the following limits:

\$1,000,000 Each Incident; Occurrence; Wrongful Act \$3,000,000 Aggregate

The insurance certificate name as to the certificate holder shall be as follows:

The Black Horse Pike Regional Board of Education c/o The Business Office 580 Erial Road Blackwood, NJ 08012

The insurance certificate shall remain in full force during the term of contract.

Form **W-9** (Rev. December 2011) Department of the Treasury Internal Revenue Service

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above			
Check appropriate box for federal tax classification:			
	rust/estate		
Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partner	ship) ►		Exempt payee
☐ Other (see instructions) ►			
Address (number, street, and apt. or suite no.)	Requester's	name and address (optional)
City, state, and ZIP code			
List account number(s) here (optional)			
t Taxpayer Identification Number (TIN)			
your TIN in the appropriate box. The TIN provided must match the name given on the "Name	" line So	cial security numbe	r
			-
	Em	nplover identification	n number
		-	
Certification			
	Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for federal tax classification: Check appropriate box for the tax classification for the the format alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other	Check appropriate box for federal tax classification: Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ Other (see instructions) ▶ Address (number, street, and apt. or suite no.) Requester's City, state, and ZIP code List account number(s) here (optional) 1 Taxpayer Identification Number (TIN) your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line ind backup withholding. For individuals, this is your social security number (SSN). However, for a ant alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> n page 3. If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	Check appropriate box for federal tax classification: □ Individual/sole proprietor □ C Corporation □ S Corporation □ Partnership □ Trust/estate □ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ □ Other (see instructions) ▶ Address (number, street, and apt. or suite no.) Requester's name and address (response) □ City, state, and ZIP code □ □ List account number(s) here (optional) Social security number (SN). However, for a ant alien, sole proprietor, or disregarded entity, see the Part 1 instructions on page 3. For other is, it is your employer identification number (EIN). If you do not have a number, see How to get a n page 3. Social security number (SN). However, for a in tailen, sole proprietor, or disregarded entity, see the Part 1 instructions on page 3. For other is, it is your employer identification number (EIN). If you do not have a number, see How to get a n page 3. Implage 3. If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter. Implage 4 for guidelines on whose

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of
	U.S. person 🕨

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income. Date 🕨

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

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Architect's Fee Schedule Must be the last page of the Bid Packet