### REQUEST FOR PROPOSALS

Issued by



**For**

**Lease Space**

**For the**

**South Plains Regional Workforce Development Board Administration Office**

Issued: **Friday March 1, 2019**

Proposal due Date and Time

**April 5, 2019 5:00 p.m.**

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**I. Introduction**

The South Plains Regional Workforce Development Board dba Workforce Solutions South Plains (hereinafter, “the Board”) is a 501(c)(3) Non-profit Corporation that administers workforce development services funded by the Texas Workforce Commission (TWC) for the 15-county South Plains Regional Workforce Development Area (SPRWDA) which consists of Bailey, Cochran, Crosby, Dickens, Floyd, Garza, Hale, Hockley, King, Lamb, Lubbock, Lynn, Motley, Terry and Yoakum Counties.

The Board is governed by a thirty-five (35) member Board of Directors and the Chief Elected Officials of the fifteen (15) county region. The Board is responsible for the oversight of employer, jobseeker, childcare, and youth services contractors and providers. The Board is the administrative entity for five, full-service Workforce Solutions Career Centers that provide services to residents of the South Plains. These facilities, located in Brownfield, Lubbock, Levelland, Muleshoe and Plainview, are leased facilities and are open to the public from 8 a.m. to 5 p.m. five (5) days a week Monday through Friday. Some of the facilities have extended hours. Board administration office operates five (5) days per week and is open Monday through Friday.

**II. Purpose of RFP**

The Board is soliciting proposals for office space in Lubbock, Texas. The office will serve as the location for the South Plains Regional Workforce Development Board (Board) offices and the Texas Workforce Commission’s Vocational Rehabilitation Regional Office (TWC-VR). The Board will be the lease-holder. The Board will consider a stand-alone location or co-location with another tenant in a “like industry” (post-secondary educational institutions, community-based organizations, business consulting, business development, economic and workforce development agencies, etc.) Organizations may provide information for one or more locations. The Board and TWC-VR will handle technology connectivity at the location.

### III. Description of Occupancy Needs

This section provides an explanation of facility lease needs, requirements and specifications.

Location:

Office space is to be located within the city of Lubbock.

Specifications/Requirements:

Approximately 15,000 to 20,000 square feet in Lubbock, TX, that is appropriately zoned for office usage.

The building must be able to meet the suggested and required needs of the
Board and TWC VR staff:

* Facility must be asbestos-free, or an asbestos-managed environment in compliance with the Texas Department of State Health Services.
* Facility must include sufficient parking (70 or more) that meets minimum zoning requirements.
* Parking must include a minimum of two accessible parking spaces, one for van accessibility.
* Building may be located near/convenient to public transportation.
* Building must pass inspection by a state official prior to a lease being executed.
* Facility may include reception/waiting area.
* The building must provide space to accommodate approximately 40 staff 28 in offices. The offices must be no smaller than 8x10 with two larger, executive offices.
	+ The Board requires 18 offices, one executive size office.
	+ TWC VR requires 10 offices, one executive size and space for 12 workstations.
* The building must comply with the American with Disabilities Act (ADA) and the ADA Amendment –owner/landlord to make all necessary/required accommodations for persons with disabilities; i.e. ramps, doors, signage, restrooms, etc.
* All rooms in the building must meet ADA requirements, including accessible door handles, and hallways shall be no less than forty-eight inches wide.
* All restrooms must meet ADA accessibility requirements, and there must be at least two sets of bathrooms or larger bathrooms that will properly accommodate staff and the public.
* Elevators must meet ADA requirements.
* The building must provide a room for a computer server & related equipment (separate temperature control needed).
* One to two conference rooms that can accommodate 50-60 individuals around tables (30x30).
* Two conference rooms that can accommodate up to 20 individuals around tables (20x20).
* Storage, supply, file room for Board staff.
* Storage, supply, file room for TWC VR staff.
* Breakroom that can accommodate up to 20 staff around tables.
* Facility should be ready for occupancy on or about December 1, 2019.

**Preference:** The Board and TWC-VR prefers space that is move-in ready or would require minimal build-out. The Board is willing to enter into a five (5) year lease, with the option to renew for an additional five (5) year period. Lease provisions must include an early termination clause (without penalty) should the Board suffer a loss of its public funding (equivalent to 15% or more in one year). Owner/landlord will be responsible for the repair and maintenance of plumbing, HVAC, roof, foundation, flooring, and other structures or equipment serving the facility, and any items considered long-lived assets. Such costs shall not be the responsibility of the Board.

**IV. Evaluation of Proposals**

All proposals will be reviewed and evaluated by a review team designated by the Board’s Chief Executive Officer. The evaluation process will include the following steps:

**Step 1** – review team will determine responsiveness of each proposal received in terms of the requirements and specifications contained in this RFP. Proposals deemed as non-responsive will not be considered for selection/award.

**Step 2** – responsive proposals will be evaluated and scored using a standardized instrument listing the criteria contained in this RFP.

**Step 3** – scores will be totaled and a rank of proposals determined

**Step 4**- Board and TWC-VR staff may conduct walk-throughs of responsive building proposals.

**Step 5**- Board staff will present proposal information and a recommendation to the Board of Directors for approval.

**Step 6** – Board staff will notify all proposers of their selection or non-selection. Negotiations will begin with the selected proposer.

Evaluation Criteria

**A. Proposed Facility 50 Points**

* Location –within desired geographic area, Lubbock, TX, near or convenient to a public transportation stop
* Appropriately zoned for office usage
* Floor plan – space requirements; ADA compliant
* Sufficiency of parking
* Access

**B. Reasonableness of Cost 40 Points**

* Base lease/rent amount
* Proposed escalation clauses
* CAM costs
* Insurance requirements

**C. Other 10 Points**

* Restrictions
* Acceptance of funding clause

**D. HUB Bonus Points 5 Points**

(For Historically Under-utilized Businesses with a valid certification)

**Total Possible Points 105 Points**

A minimum aggregate average score of 75 points is required to be considered for Selection.

**V. RFP Availability and Submission**

This RFP is released on Friday March 1, 2019, 5:00 p.m. (CST), and may be obtained from the offices of Workforce Solutions South Plains Workforce Development Board located at 1301 Broadway, Suite 201, Lubbock, Texas 79401, and by emailing erin.rea@spworkforce.org.

**Proposals must be received no later than 5:00 p.m. (CST) on Friday April 5, 2019.** Proposals must be hand delivered or mailed. Faxed or electronic submissions will not be accepted. Proposer is solely responsible for ensuring that their proposal is physically received by the Board by the submission date. The Board is not responsible for any errors or failures on the part of the U.S. Postal Service or other carrier regarding the timely delivery of a proposal. Late proposals will not be accepted.

NUMBER OF COPIES - One original and three (3) copies of the completed proposal must be submitted. Proposals should be clipped or stapled in the upper left-had corner. Fancy bindings or notebooks are not required. Responses should be prepared using the forms provided and presented in a clear and concise manner and submitted in the order as prescribed below.

SUBMISSION ORDER

* Cover Sheet (Attachment A)
* Application (Attachment B)
* Floor Plan
* HUB Certification (if applicable)
* Certification of Proposer (Attachment C)
* Certifications Regarding Lobbying, Debarment and Drug-Free Workplace (Attachment D)
* Texas Corporate Franchise Tax Certification (Attachment E) – if applicable
* State Assessment Certification (Attachment F) – if applicable
* Certification Regarding Conflict of Interest (Attachment G)
* Other relevant information

Proposals should be submitted to:

Workforce Solutions South Plains WDB

Attn: Erin Rea

1301 Broadway, Suite 201

Lubbock, TX 79401

Board staff, upon request, will issue verification of receipt. Any modifications or amendments to a proposal must also comply with the above requirements and the response deadline.

*The submission of a proposal does not commit the Board to the award of a contract or agreement. The Board will not pay for any costs incurred in responding to this RFP or for any costs incurred prior to the execution of a contract.*

**VI. Proposal Questions**

The Board will accept questions regarding this proposal through Monday, March 25, 2019. Questions may be submitted to erin.rea@spworkforce.org. A question and answer document will be prepared and provided at www.workforcesouthplains.org. Questions received after March 25, 2019 will not be responded to. A bidder’s conference will not be held.

**VII. General Conditions/Limitations**

1. The only purpose of this Request for Proposal (RFP) is to ensure uniform information in the solicitation of proposals and procurement of services. This RFP is not to be construed as a purchase agreement or contract or as a commitment of any kind; nor does it commit the Board to pay for costs incurred prior to the execution of a formal contract unless such costs are specifically authorized in writing by Board.
2. The Board reserves the right to accept or reject any information received, to cancel or reissue this RFP in part or its entirety.
3. The Board reserves the right to negotiate the final terms of any and all contracts or agreements that may be initiated from this RFP.
4. Misrepresentation of the submitter’s ability to perform as stated in the information provided may result in cancellation of any contract or agreement awarded.
5. Submitters shall not, under penalty of law, offer or provide any gratuities, favors, or anything of monetary value to any officer, member, employee, or agent of the Board for the purpose of having an influencing effect toward their own proposal or any other proposal submitted hereunder.
6. No employee, officer, member or agent of the Board shall participate in the selection, award or administration of a contract if a conflict of interest, or potential conflict, would be involved.
7. Submitters shall not engage in any activity that will restrict or eliminate competition. Violation of this provision may cause a submitter’s information to be rejected. This does not preclude joint ventures or subcontracts.
8. Any submitter may withdraw his information either in person or by written request by a duly authorized representative at any time prior to the scheduled closing time for receipt of bids.
9. No contract may be awarded until the submitter has complied with Executive Order 12549, 29CFR, Part 98 by submitting to the Board a signed Certification of Debarment, which states that neither the submitter, nor any of its principals, are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in a procurement by any Federal department or agency.
10. The Board’s Chief Operations Officer is the responsible authority for handling complaints or protests regarding the procurement and proposal selection process. No protest shall be accepted by the State until all administrative remedies at the Board level have been exhausted.
11. Submitters not selected by this process may appeal the Board decision by submitting in writing a formal letter of appeal addressed Chief Operations Officer, Workforce Solutions South Plains, 1301 Broadway, Ste 201, Lubbock, Texas, 79401. This appeal must be sent by registered mail and identified on the envelope as an appeal with the grounds of the appeal clearly stated in the letter, within fourteen calendar days of decision notification (the date on the notification letter). The Chief Operations Officer shall review the appeal and review applicable laws, and request determination if appeal is valid and shall make decisions. If persons are not satisfied with the decision they may pursue all other avenues of appeal provided by law.
12. Proposals must be manually signed by a person having the authority to bind the organization in a contract.
13. Any material that is to be considered as confidential in nature must be clearly marked as such and will be treated as confidential by the Board to the extent allowable in the Public Information Act.

O. Funding for goods or services requested in this RFP is contingent upon the Board's actual receipt and availability of funds from the Texas Workforce Commission.

P. Workforce Solutions South Plains is an equal opportunity employer and complies fully with the nondiscrimination and equal opportunity provisions of the following laws: Section 188 of the Workforce Innovation Opportunity Act (WIOA), which prohibits discrimination against all individuals in the United States on the basis of race, color , religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIOA Title I- financially assisted program or activity; Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color and national origin; ADA and ADA Amendment and Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities; the Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs.

**ATTACHMENT A- PROPOSAL COVER SHEET**

|  |  |
| --- | --- |
| Name of Organization |  |
| Mailing Address |  |
| City/State/Zip Code |  |
| Authorized Representative-Contact |  |
| Telephone Number |  |
| Fax Number |  |
| Email Address |  |
| Federal Employer ID Number |  |
| State Comptroller ID Number |  |
| HUB | [ ] YES [ ] NO if YES:Certification No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certifying Agency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Attach a copy of current certification. |
| Type of Organization | [ ] Corporation [ ] Partnership [ ]  Sole Ownership [ ] Other (describe) |
| Name & Title of Authorized Signatory |  |
| Signature and Date |  |

**ATTACMENT B- APPLICATION**

|  |  |
| --- | --- |
| Physical Address of Proposed Facility |  |
| Name of building owner |  |
| Name of property management company if applicable  |  |
| Age of Facility | Year Built:\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are there currently any tax or other types of liens against the property? | [ ] YES [ ]  NO If YES, identify: |
| Does the facility meet ADA requirements  | [ ] YES [ ] NO  |
| Does the facility have ADA bathrooms, how many bathrooms are in the space | [ ] YES [ ]  NO  |
| Are the elevators ADA compliant | [ ] YES [ ] NO  |
| Is the facility near or convenient to a public transportation stop? | [ ] YES [ ] NO  |
| Access to facility: Monday through Friday 7:00 a.m. to 6:30 p. m. | [ ] YES [ ] NO  |
| Are employees able to enter/open the building at any time? | [ ] YES [ ] NO If NO, detail the procedure for off hours entry: |
| The Board requires space for 18 employees, TWC VR 22 employees. The description of the facility needs are in section III.  | Total Square Footage\_\_\_\_\_\_\_\_\_\_Co-located Space [ ] YES [ ] NO If YES, identify organization with which the office would be co-located:  |
| Square Footage Cost | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per square foot |
| Floor Plan | Attach Copy |
| Other Occupants | List, if applicable, if building has any other existing occupants |
| Insurance Requirements | Specify: |
| How many parking spaces are available. Listed requirement is at least 70 for staff and the public | Detail number of parking spaces available.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| How many ADA accessible parking spaces are available minimum requirement is two with one being van accessible. | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Building Maintenance/Repair/Utilities | Owner/landlord willing to accept for repair and maintenance of roof, foundation, parking, plumbing, HVAC, structural soundness, other structures or equipment serving the facility, ceiling tiles, flooring, and any other items considered long-lived assets[ ] YES [ ] NO Owner/landlord pays utility cost[ ] YES [ ] NOComments:  |
| Terms of Lease-i.e. length, renewal, notices, escalation clauses, restrictions, etc. May submit a draft copy of a lease agreement | Owner/landlord willing to accept a five-year lease with a five-year lease option for a total of ten years.[ ] YES [ ] NOComments: |
| Do you agree to the Provision that allows early termination (without penalty) should Workforce Solutions suffer a loss of its public funding equivalent to 15% or more in one year.  | [ ] YES [ ] NO Comments:  |
| Are you willing to accept a lease provision with the Board that will delay the part of the lease payment that would be paid to the Board by TWC VR. TWC VR’s lease expires on August 31, 2020. The Board will pay its share of the lease and TWC VR would begin paying a share of the lease on September 1, 2020.  | [ ] Yes [ ] NoComments: |
| Would facility be ready to occupy on January 1, 2020? | [ ] YES [ ] NO If NO, estimate the date of availability for occupancy:  |
| If you have previously leased space to other entities provide at least three (3) references you have leased/rented space to in the last three (3) years. Provide contact name and phone number. | You may attach this information. |
| Provide any additional information you believe to be an asset of this location. |  |

Please provide additional narrative regarding this facility in this section. Please Attach any additional relevant information:

**ATTACHMENT C - CERTIFICATION OF PROPOSER**

I hereby certify that the information contained in this proposal and any attachments is true and correct and may be viewed as an accurate representation of proposed services to be provided and the administrative, management and financial systems of this organization. I certify that no employee of Workforce Solutions South Plains has assisted in the preparation of this proposal.

I acknowledge that I have read and understand the requirements and provisions of the RFP and that the organization will comply with applicable local, state and federal regulations and directives in the implementation of the program. I also certify that I have read and understand the Governing Provisions and Limitations section presented in this RFP and will comply with the terms.

This proposal is a firm offer for a minimum of 90 days.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certify that I am the

(Typed Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of the corporation, partnership, organization, or other

(Typed Title)

entity named as Respondent herein and that I am authorized to sign this proposal and

submit it to the Workforce Solutions South Plains Workforce Board on behalf of said

organization by authority of its governing body.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Phone)

**ATTACHMENT D - CERTIFICATONS REGARDING LOBBYING, DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS, AND DRUG-FREE WORKPLACE REQUIREMENTS**

Lobbying: This certification is required by the Federal Regulations, implementing Section 1352 of the Program Fraud and Civil Remedies Act, Title 31 U.S. Code, for the Department of Education (34 CFR Part 82), Department of Health and Human Services (45 CFR Part 93).

The undersigned contractor certifies that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form – LLL, “Disclosure Form to Report Lobbying”, in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

Debarment, Suspension, and Other Responsibility Matters: This certification is required by the Federal Regulations, implementing, Executive Order 12549, Government-wide Debarment and Suspension, for the Department of Agriculture (7 CFR Part 3017), Department of Labor (29 CFR Part 98), Department of Education (34 CFR Parts 85, 668 and 682), Department of Health and Human Services (45 CFR Part 76).

The undersigned contractor certifies that neither it nor its principals:

1. Are presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency.
2. Have not within a three-year period preceding this contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, State or Local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity with commission of any of the offenses enumerated in Paragraph (2) of this certification; and,
4. Have not within a three-year period preceding this contract had one or more public transactions terminated for cause or default.

Where the prospective recipient of federal assistance funds is unable to certify to any of the statements in this certification, such prospective recipient shall attach an explanation to this certification.

Drug-Free Workplace: This certification is required by the Federal Regulations, implementing Sections 5151-5160 of the Drug-Free Workplace Act, 41 U.S.C. 701; for the Department of Agriculture (7 CFR Part 3017), Department of Labor (29 CFR Part 98), Department of Education (34 CFR Parts 85, 668 and 682), and Department of Health and Human Services (45 CFR Part 76).

The undersigned contractor certifies that it shall provide a drug-free workplace by:

1. Publishing a policy statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the consequences of any such action by an employee;
2. Establishing an ongoing drug-free awareness program to inform employees of the dangers of drug abuse in the workplace, the Contractor’s policy of maintaining a drug-free workplace, the availability of counseling, rehabilitation and employee assistance programs, and the penalties that may be imposed on employees for drug abuse violations in the workplace;
3. Providing each employee with a copy of the Contractor’s policy statement;
4. Notifying the employees in the Contractor’s policy statement that as a condition of employment under this contract, employees shall abide by the terms of the policy statement and notifying the Contractor in writing within five days after any conviction for a violation by the employee of a criminal drug statute in the workplace;
5. Notifying the Board within ten days of Contractor’s receipt of a notice of a conviction of an employee; and,
6. Taking appropriate personnel action against an employee convicted of violating a criminal drug statute or requires such employee to participate in a drug abuse assistance or rehabilitation program.

These certifications are a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type Name and Title

**ATTACHMENT E - TEXAS CORPORATE FRANCHISE TAX CERTIFICATION**

Pursuant to Article 2.45, Texas Business Corporation Act, state agencies may not contract with for profit corporations that are delinquent in making state franchise tax payments. The following certification that the corporation entering into this contract is current in its franchise taxes must be signed by the individual on Form 203, Corporate Board of Directors Resolution, to sign the contract for the corporation.

The undersigned authorized representative of the corporation contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

Indicate the certification that applies to your corporation:

The Corporation is a for-profit corporation and certifies that it is not delinquent in its franchise tax payments to the State of Texas.

The Corporation is a non-profit corporation or is otherwise not subject to payment of franchise taxes to the State of Texas.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type Name and Title

**ATTACHMENT F - STATE ASSESSMENT CERTIFICATION**

The undersigned authorized representative of the firm or individual contracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of contract and is grounds for contract cancellation.

The firm or individual certifies that:

Is current in Unemployment Insurance taxes, Payday and Child Labor law monetary obligations, and Proprietary School fees and assessments payable to the State of Texas.

Has no outstanding Unemployment Insurance overpayment balance payable to the State of Texas.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type Name and Title

**ATTACHMENT G - CERTIFICATION REGARDING CONFLICT OF INTEREST**

By signature of this proposal, Proposer covenants and affirms that:

1. no manager, employee or paid consultant of the Proposer is a member of the Board, the Executive Director, or an employee of South Plains Regional Workforce Development Board (Board);
2. no manager or paid consultant of the Proposer is married to a member of the Board, the Executive Director, or an employee of the Board;
3. no member of the Board, the Executive Director or employee of the Board owns or controls more than a 10 percent interest in the Proposer;
4. no spouse or member of the Board, Executive Director or employee of the Board is a manager or paid consultant of the Proposer;
5. no member of the Board, the Executive Director or employee of the Board receives compensation from Proposer for lobbying activities as defined in Chapter 305 of the Texas Government Code;
6. proposer has disclosed within the Proposal any interest, fact or circumstance which does or may present a potential conflict of interest;
7. should Proposer fail to abide by the foregoing covenants and affirmations regarding conflict of interest, Proposer shall not be entitled to the recovery of any costs or expenses incurred in relation to any contract with the Board and shall immediately refund any fees or expenses that may have been paid under the contract and shall further be liable for any other costs incurred or damages sustained by the Board relating to that contract.

Disclosure of Potential Conflict of

Interest\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name/Title of Authorized

Signatory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_