### **COCISD Vendor Checklist Forms V3E**

On Campus with Students, Unsupervised OR > than 5 days) + Federal (E.D.G.A.R.)

| Cor   | ntractor:  |             |               |      |      |
|-------|------------|-------------|---------------|------|------|
| ***** | Initial by | each item b | efore sending | back | **** |

| 1  | Checklist   | Federal (Section 8)                                 |
|----|---|---|
| 2  | Student Involvement Form                                  | 8 E.D.G.A.R. Certifications                         |
|    | <ul> <li>Department Signature &amp; Bookkeeper</li> </ul> |   |
|    | signature   | 8a Suspension and Debarment Form                    |
| 3  | Independent Contract Agreement (Signed)                   | 8b Ineligibility and Voluntary Exclusion Lower Tier |
|    | • (OR) An equivalent Contract Agreement                   | Covered Transactions                                |
|    | All blanks are completed                                  | 8c Contractors Alcohol & Tobacco Free               |
|    | • (date of services and price)                            | 8c Contractors Alcohor & Tobacco Free               |
|    | , ,   | 8d Contractors Drug Free Workplace                  |
| 4  | Vendor Information Form                                   | On Chatamant of Nam Callingian and Nam              |
| _  | Due surround the Cotto complete una                       | 8e Statement of Non-Collusion and Non-              |
| 5  | Procurement Category form                                 | Discrimination                                      |
| 6  | W-9 Form  | 8f Buy American Provision Certification             |
|    | <ul> <li>Document is complete</li> </ul>                  |   |
|    | <ul> <li>updated Information if changed</li> </ul>        | 8g Buy American Waiver Exception List               |
|    |   | 9a Contractor's Certificate of Worker's Comp.       |
| 7a | CIQ Instructions  |   |
|    |   | 9b HUB Participation                                |
| 7b | CIQ Questionnaire   | 9c Iran Contracting Act (Contracts \$1 million +)   |
| _  |   |   |
| /c | Insurance requirements                                    | Criminal History                                    |
| 7d | Certificate of Interested Parties                         |   |
|    |   | 10 Felony Conviction Notification                   |
| 7e | Certificate of Residency                                  | 11a Instructions to Obtain Fingerprints thru DPS    |
| 7f | Certificate of Anti-boycott Israel                        | moti decions to obtain imperprints that big         |
|    |   | 11b DPS CCH Verification form                       |
| 7g | Certification of Compliance Regarding Texas               | 12 Criminal History Authorization form              |
|    | Family Code   | 12 Criminal History Authorization form              |
|    |   | 14 Form 1295 & Instructions                         |

### \*ONLY COMPLETE IF APPLIES - SENDING SUBCONTRACTORS OR MORE THAN 4 EMPLOYEES \*

13a\_\_\_\_\_ Certification of Criminal History (General Contractor with employees or Subcontractors)

• The General Contractor is a company that sends various employees OR subcontractors out to the district, the company signs forms related to their obligation to maintain criminal history checks on employees and subcontractors.

| 13h | Contractor's Certif | icati∩r |
|-----|---------------------|---------|
|     |                     |         |

### Independent Contractor (Vendor) / Student Involvement

This form allows you to determine what vendor packet is appropriate. PICK ONLY ONE OPTION!

| V1. The contractor (vendor) does not come on campus & only sells services or products to   | from afar. The minimal campus  |
|--|--|
| contact is limited to supervised deliveries & pick-ups at most Yes No  | COMPLETE   |
|  | VENDOR PACKET  |
| (staff signature)  | V1 or V1E  |
|  | (NO EXPOSURE)  |
| (Independent Contractor signature)   |  |
|  |  |
| <b>V2.</b> The contractor will <u>ONLY</u> be around a group of students (never alone with students) sponsor /staff member present and <u>NO MORE THAN FIVE DAYS?</u> Yes No   | <i>BUT ALWAYS WITH</i> a   |
| sponsor/starr member present and No World MANTIVE DATS: res No   | COMPLETE   |
|  | VENDOR PACKET  |
| (staff signature)  | V2 or V2E  |
| (Independent Contractor signature)   |  |
| MAINTENANCE/GROUNDS - TECHNOLOGY - FACILITY PLANNING - TRA   | ANSPORTATION - POLICE  |
| * * * ONLY WHEN APPLICABLE* *  | * *  |
|  |  |
| SOME DEALINGS MAY WARRANT VENDOR   |  |
|  | PACKET (V3)  |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the per around a group of students but will <u>NEVER</u> be with students alone. <u>This contractor will A</u>   | PACKET (V3)  |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the pe   | PACKET (V3)  |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the per around a group of students but will <u>NEVER</u> be with students alone. <u>This contractor will A</u>   | PACKET (V3) erformance of their services be ALWAYS be accompanied by a   |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the per around a group of students but will <u>NEVER</u> be with students alone. This contractor will A Professional Employee Yes No (staff signature)   | PACKET (V3) erformance of their services be ALWAYS be accompanied by a  COMPLETE VENDOR PACKET   |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the per around a group of students but will <u>NEVER</u> be with students alone. <u>This contractor will A Professional Employee</u> Yes No  | erformance of their services be accompanied by a COMPLETE  |
| V2 (b). The contractor may be here <u>MORE THAN FIVE DAYS</u> and may through the per around a group of students but will <u>NEVER</u> be with students alone. This contractor will A Professional Employee Yes No (staff signature)   | PACKET (V3)  erformance of their services be ALWAYS be accompanied by a  COMPLETE  VENDOR PACKET  V2 or V2E  |
| V2 (b). The contractor may be here MORE THAN FIVE DAYS and may through the peraround a group of students but will NEVER be with students alone. This contractor will A Professional Employee. Yes No   | erformance of their services be ALWAYS be accompanied by a COMPLETE VENDOR PACKET V2 or V2E  |
| V2 (b). The contractor may be here MORE THAN FIVE DAYS and may through the per around a group of students but will NEVER be with students alone. This contractor will A Professional Employee. Yes No (staff signature) (Independent Contractor signature)  V3. The contractor has the opportunity to be ALONE or with a group of students or will be alone. | PACKET (V3)  erformance of their services be ALWAYS be accompanied by a  COMPLETE VENDOR PACKET V2 or V2E  the here MORE THAN 5 DAYS IN  COMPLETE  |
| V2 (b). The contractor may be here MORE THAN FIVE DAYS and may through the per around a group of students but will NEVER be with students alone. This contractor will A Professional Employee. Yes No (staff signature) (Independent Contractor signature)  V3. The contractor has the opportunity to be ALONE or with a group of students or will be alone. | PACKET (V3)  erformance of their services be ALWAYS be accompanied by a  COMPLETE VENDOR PACKET V2 or V2E  De here MORE THAN 5 DAYS IN  COMPLETE VENDOR PACKET                                       |
| V2 (b). The contractor may be here MORE THAN FIVE DAYS and may through the peraround a group of students but will NEVER be with students alone. This contractor will A Professional Employee.  Yes No  | PACKET (V3)  erformance of their services be ALWAYS be accompanied by a  COMPLETE VENDOR PACKET V2 or V2E  De here MORE THAN 5 DAYS IN  COMPLETE VENDOR PACKET VENDOR PACKET VENDOR PACKET VA or V3E |
| V2 (b). The contractor may be here MORE THAN FIVE DAYS and may through the peraround a group of students but will NEVER be with students alone. This contractor will A Professional Employee.  Yes No  | PACKET (V3)  erformance of their services be ALWAYS be accompanied by a  COMPLETE VENDOR PACKET V2 or V2E  De here MORE THAN 5 DAYS IN  COMPLETE VENDOR PACKET                                       |

### INDEPENDENT CONTRACTOR AGREEMENT

| STATE OF TEXAS §  §   |
|---|
| COUNTY OF San Jacinto §   |
| This Independent Contractor Agreement ("Agreement") is made by and between Coldspring-Oakhurst Consolidated ISD "COCSID" and ("Independent Contractor"), with an effective date of  |
| WHEREAS, the Independent Contractor represents that the Independent Contractor has extensive experience as a(n)(AREA OF SPECIALIZATION); and  |
| WHEREAS, the Independent Contractor agrees to provide the professional services listed herein to NCISD on an as-needed basis during the term of this Agreement.   |
| NOW, THERFORE, in consideration of the promises and mutual covenants contained in this Agreement, NCISD and the Independent Contractor agree as follows:  |
| I. SCOPE OF AGREEMENT AND LIMITATIONS OF AUTHORITY  1.1. <i>Purpose</i> : The Independent Contractor is hereby contracted to perform the services that NCISD specifies below on an as-needed basis, including but not limited to the following: |
| 1,  |
| 2   |
| 3   |

- 1.2. The Independent Contractor has no authority to act for, or on behalf of, COCISD except as provided for in this Agreement. No other authority or power is granted or implied.
- 1.3. The Independent Contractor may not incur any debt, obligation, expense, or liability of any kind against COCISD without COCISD's express written authorization.
- 1.4. The Independent Contractor has no rights or benefits other than those set forth in this Agreement.
- 1.5. The Independent Contractor agrees that COCISD is not responsible or liable for any damages, injuries, deaths, or any other form of loss or harm arising from any of the Independent Contractor's negligent or intentional acts or omissions during the term of this Agreement.
- 1.6. The Independent Contractor will be responsible for the Independent Contractor's own negligent or intentional acts or omissions in connection with the performance of services under this Agreement.
- 1.7 The Independent Contractor hereby agrees and consents to COCISD obtaining the criminal history information of the Independent Contractor and agrees to waive any and all rights or claims arising under the Texas or United States Constitution, common law, or state or federal statutes, with respect to COCISD obtaining such criminal history, including, but not limited to, the right to be free from unreasonable searches or seizures, and any other privacy rights.
- 1.8 The Independent Contractor agrees to comply with all laws, regulations and rules of the United States, the State of Texas, the Texas Education Agency, the Texas Commissioner of Education, and COCISD, concerning the provision of services to COCISD and its students, including but not limited to, duties with respect to confidentiality of student records, duties to report abuse or neglect of students, and duties regarding the discipline and management of students.



- 1.9 The Independent Contractor affirmatively represents and avers that the Independent Contractor is fully qualified, by training or experience, to provide the services contemplated by this Agreement, and possesses all valid certifications and licenses required by any governmental entity, and has met all required registration requirements, that are necessary to authorize the Independent Contractor to perform the professional services contemplated by this Agreement.
- 1.10 The Independent Contractor, prior to performing any services to COCISD under this Agreement, shall provide to COCISD copies of all licenses and certifications that confirm the representations and affirmations contained herein.

### II. RELATIONSHIP OF PARTIES

- 2.1. The Parties to this Agreement intend that the Independent Contractor, in performing the contracted services, will act and operate solely as an independent contractor. As such, the Independent Contractor shall maintain control of the work and the manner in which it is performed, and shall be free to accept and perform work for third-parties during the term of this Agreement.
- 2.2. The Independent Contractor acknowledges and agrees that the Independent Contractor is not an employee of COCISD and, accordingly, is not entitled to any benefits, insurance, or other privileges available to COCISD employees. The Independent Contractor shall not represent to any person or entity that the Independent Contractor is an employee or agent of COCISD. COCISD will not deduct any social security or income taxes from the payments made to the Independent Contractor as set forth in Section IV. COCISD will issue the Independent Contractor a 1099-Misc. form reflecting COCISD compensation from COCISD and the Independent Contractor will be liable for any and all worker's compensation payments and federal, state, and local employment, sales, use, excise, and other taxes arising out of the Independent Contractor's receipt of compensation under this Agreement.

### III. TERM; EXTENSION; TERMINATION

| 3.1. | Term: | The | term | of | this | Agreement     | shall    | begin  | on     |                             | (DATE)    | and   | end   | 017 |
|------|-------|-----|------|----|------|---------------|----------|--------|--------|-----------------------------|-----------|-------|-------|-----|
|      |       |     |      |    | (DA  | ΓE) unless ea | arlier t | ermina | ted in | n accordance with the terms | of this A | green | nent. |     |

- 3.2. Either party to this Agreement may terminate the Agreement at any time for any reason or for no reason. Good cause is not required for either party to terminate the Agreement. The terminating party shall provide written notice of termination to the other party. The parties agree that no property rights or interests under the Texas or United States Constitution are created by this Agreement.
- 3.3 Upon the termination of this Agreement, the Independent Contractor will deliver to COCISD all data, documents and other information pertaining to COCISD or COCISD's students in the Independent Contractor's possession, custody or control, within three (3) COCISD business days following the termination of this Agreement.
- 3.4 In the event this Agreement is terminated during the contract term, the Independent Contractor shall solely be entitled to payment for those services actually performed through the date of termination. **ALL OTHER DAMAGES OF ANY KIND ARE HEREBY WAIVED BY THE INDEPENDENT CONTRACTOR.** Without limitation, Independent Contractor shall not be entitled to any other compensation from COCISD, and shall not be entitled to any consequential damages, damages for lost opportunity, or damages for lost profits of any kind.

### IV. COMPENSATION

4.1 The Independent Contractor will submit invoices to COCISD on a monthly basis for services rendered pursuant to this Agreement. Without limitation, the total compensation payable to Independent Contractor during the term of this Agreement shall not exceed the sum of \$\_\_\_\_\_\_\_. Payment from COCISD shall be made within 30 days of service and receipt of an invoice. (for District-Wide Agreements that multiple campuses/departments can use: Please note "See Attached" in the space above and attach a detailed "Fee Schedule" that district & campuses can reference regarding the cost of individual services. As services are scheduled, a QUOTE shall be sent to the campus/department that is requesting the service. This Agreement shall

<u>be referenced on ALL quotes.</u> In this case, invoices shall be sent individually to the campus/department as services are rendered and as they are originally quoted with regards to the "Fee Schedule" attached to this Agreement)

- 4.2 The Independent Contractor is responsible for payment of all State, Federal, foreign, or local taxes, including income tax, withholding tax, social security tax, or pension contributions, on the funds distributed to the Independent Contractor by COCISD. COCISD is not responsible for payment of taxes or penalties applicable to nonpayment or underpayment of taxes. The Independent Contractor is further responsible for payment of any and all expenses, insurance premiums, including errors and omissions policies, medical insurance policies, or life insurance policies that the Independent Contractor may need or desire to perform services under this Agreement.
- 4.3 The compensation set forth in this Section IV is the sole compensation available to the Independent Contractor for services performed under this Agreement.
- 4.4 All amounts to be paid under this Agreement are specifically contingent on COCISD's receipt of funds from the State of Texas and/or the federal government.

### V. WORK STANDARDS/STANDARD OF CARE

The Independent Contractor shall control the method, means and details of the work performed under this Agreement. The Independent Contractor shall perform services under this Agreement in conformance with, and will adhere to, the standards of professional skill, care, and quality ordinarily provided by members of the Independent Contractor's profession in Texas performing the same or similar services, shall perform all services required under this Agreement in a manner consistent with those standards of care, and shall provide services under this Agreement in a good and workmanlike manner.

#### VI. MATERIALS AND EQUIPMENT

The Independent Contractor shall furnish, at the Independent Contractor's own expense, all materials, equipment, and supplies necessary for the Independent Contractor to perform services under this Agreement.

### VII. INSURANCE/INDEMNIFICATION

- 7.1 The Independent Contractor shall maintain a policy or policies of liability insurance with coverages (including, but not limited to, professional liability coverage) that is/are sufficient to protect COCISD and the Independent Contractor against any claims, demands, causes of action, or damages arising out of the Independent Contractor's performance of services under this Agreement. The limits of liability of such policy(ies) shall be in an amount acceptable to COCISD. Such policy(ies) (i) shall be written by companies authorized to issue such insurance policy(ies) in the State of Texas, (ii) shall and must name COCISD as an additional insured, and (iii) shall contain no specific limitations on the coverage afforded additional insureds.
- 7.2 THE INDEPENDENT CONTRACTOR SHALL INDEMNIFY, HOLD HARMLESS, SAVE, AND DEFEND NCISD AND NCISD'S OFFICERS AND EMPLOYEES FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION, AND DAMAGES, INCLUDING BUT NOT LIMITED TO REASONABLE ATTORNEYS' FEES AND EXPENSES, ARISING OUT OF OR IN ANY WAY RELATED TO THIS AGREEMENT, THE PROVISION OF SERVICES BY THE INDEPENDENT CONTRACTOR, OR ANY NEGLIGENT OR INTENTIONAL ACTS OR OMISSIONS OF THE INDEPENDENT CONTRACTOR.

#### VIII. GENERAL AND ADMINISTRATIVE PROVISIONS

- 8.1 Assignment. The Independent Contractor shall have no right to transfer or assign the Independent Contractors rights or obligations under this Agreement.
- 8.2 *No Waiver*. The failure or delay in the enforcement of the rights detailed in this Agreement by COCISD shall not constitute a waiver of those rights or be considered as a basis for estoppel. COCISD may exercise its rights under this Agreement despite the delay or failure to enforce those rights.



- 8.3 *Paragraph Headings*. The paragraph headings used in this Agreement are descriptive only and shall have no legal force or effect whatever.
- 8.4 *Use of Pronouns.* The use of the neuter singular pronoun to refer to any Party described in this Agreement shall be deemed a proper reference whether the Party is an individual, a partnership, a corporation, a governmental entity or group of two or more individuals, partnerships or corporations. The grammatical changes required to make the provisions of this Agreement applicable to corporations, partnerships, governmental entities, individuals, groups of individuals or to females as well as males shall, in all instances, be assumed as though in each case fully expressed.
- 8.5 Governing Law/Venue. This Agreement shall be subject to, construed in accordance with, and governed by the laws of the State of Texas without regard to its conflict of laws principles, the choice of law being the laws of the State of Texas. It is expressly agreed that the venue of any cause of action involving or related to this Agreement shall be in the District or County Courts of San Jacinto, Texas located in Coldspring, San Jacinto County, Texas, and any objections to such venue are hereby irrevocably waived. Any and all obligations or payments are due and payable in Coldspring, San Jacinto County, Texas.
- 8.6 Dispute Resolution/Grievance Procedure. The Independent Contractor agrees to participate in mediation with COCISD as a condition precedent to any action or lawsuit being initiated against COCISD arising under this Agreement. The Independent Contractor also agrees to participate in COCISD's internal grievance procedures as set forth in COCISD Board Policy as a condition precedent to any action or lawsuit being initiated against COCISD arising under this Agreement.
- 8.7 Severability. If any provision of this Agreement shall, for any reason, be held to be in violation of any applicable law, or if any provision of the Agreement is held to be unenforceable, the invalidity of such a specific provision in this Agreement shall not be held to invalidate any other provisions in this Agreement, which other provisions shall remain in full force and effect unless removal of the invalid provisions destroys the legitimate purposes of this Agreement, in which event this Agreement shall be cancelled.
- 8.8 *Entire Agreement*. This Agreement shall represent the entire agreement by and between COCISD and the Independent Contractor and shall supersede any prior understandings or agreements between the Parties. This Agreement may not be amended except by written amendment duly executed by the Parties.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement as of the day and year first written above.

| Please check any of the following that Current COCISD Employee: YES                    |               | RS (Teacher Retire System) | Member: YES NO                                       | Ì  |
|--|---------------|----------------------------|--|----|
| Independent Contractor   | Independent   | t Contractor's Signature   | Date   |    |
| THIS SECTION MUST BE COMPLETED BY Continuing Duties (On FUND DESIGNATION: General Fund |               |                            | ts (Non Supervised Contact)  Student Activity (Club) | 3E |
| Administrator Initiating Contract  |               | or's Signature             | Date   |    |
| (if initialed by Director of Pu  | irchasing) Li | ability Insurance Coverag  | e is waived.   |    |
| Judy Currie, Director of Purchasing  | _             |                            | Date   |    |
| John Kirkham, Executive Director of I  | —<br>Finance  |                            | <br>Date   |    |



| District Use Only |  |  |  |  |  |  |  |
|-------------------|--|--|--|--|--|--|--|
| Please Check One: |  |  |  |  |  |  |  |
| General Fund:     |  |  |  |  |  |  |  |
| Activity Fund:    |  |  |  |  |  |  |  |
| Club Fund:        |  |  |  |  |  |  |  |

# Coldspring-Oakhurst CISD Vendor Information Form

| Vendor Name:   |                            | 25.000.00000          |
|--|----------------------------|-----------------------|
| Sales Representative & Phone Number:   |                            |                       |
| Address:   | Remit to Address:          |                       |
| City:  | City:                      |                       |
| State: Zip:  | State:                     | Zip:                  |
| Phone Number:  | Fax:                       |                       |
| Email:   |                            |                       |
| (Email address must be an ac   |                            |                       |
| What Coldspring-Oakhurst CISD Campus/De  | partment has requested yo  |                       |
| Name of Coldspring-Oakhurst CISD contact:  |                            |                       |
| List any Purchasing Cooperatives that your c   | company is a member of:    |                       |
| Each vendor must complete a W-9, CIQ and   |                            |                       |
| If vendor will be physically on a campus th<br>History Record Information Sheet. <b>Vendor</b><br><b>must complete SB9 Fingerprinting Requirer</b> | s with direct/unsupervised |                       |
| For COCISD Purchasing Department use onl If a Sole Source vendor, attach a completed   |                            | nal Copy & Notarized) |
| Requested by:  | Date of App                | roval:                |
| Approved by:   | Vendor Num                 | nber:                 |

### Procurement Categories (Please mark all that apply)

| Alasm Cuantias and Equipment   | Individual Cumpling Colores  |
|--|--|
| Alarm Supplies and Equipment   | Instructional Supplies - Science   |
| Animal Supplies and Equipment  | Instructional Supplies - Textbooks Instructional Supplies - Testing Mat  |
| Appliances & Equipment Appraisal Services  | Instructional Supplies - Lesting Mat<br>Interpreter Services - foreign lang.   |
| Architectural Services   | Laundry Equipment  |
| Athletic/PE Supplies and Equipment   | Legal Services, Attorneys, lawyers   |
| Auctioneer Services  | Library Supplies   |
| Audio Equipment & Accessories  | Library books  |
| Audit Services   | Mailing Equipment - Postage Meter Rental/Lease   |
| Auto Leases  | Maintenance Equipment Rentals  |
| Awards and Trophies  | Maintenance & Repair Services - Plumbing   |
| Books/Reading Materials  | Maintenance & Repair Services - appliances & furniture   |
| Building Construction/Improvement Services   | Maintenance & Repair Services - athletic/grounds equip   |
| Building Maintenance   | Maintenance & Repair Services - Irrigation   |
| Building Materials & Supplies  | Maintenance & Repair Services - Flooring   |
| Cafeteria & Kitchen Equipment, Commercia   | Maintenance & Repair Services - Grease Tran  |
| Cameras, Photographic Equipment, Film, & supplies  | Maintenance & Repair Services - HVAC   |
| CTE Supplies - Cosmetology   | Maintenance & Repair Services - Misc   |
| CTE Supplies - Fire Training   | Maintenance & Repair Services - Elevator   |
| CTE Supplies - Forensic Science  | Maintenance Supplies & Equipment - Elect   |
| CTE Supplies - Pharmacy Tech   | Maintenance Supplies & Equipment - Plumbing  |
| CTE Supplies - Culinary  | Maintenance Supplies & Equipment - HVAC  |
| CTE Supplies - Welding   | Maintenance Supplies & Equipment - Painting  |
| CTE Supplies - Engineering   | Maintenance Supplies & Equipment - Flooring  |
| CTE Supplies - Fashion Design  | Maintenance Equipment - Grounds/Athletic Fields  |
| CTE Supplies - Carpentry   | Maintenance Supplies - Fertilizer  |
| CTE Supplies - Business  | Maintenance Supplies - Pesticides  |
| CTE Supplies - Marketing   | Maintenance Supplies - Paint - Ath. Marking  |
| CTE Supplies - Health Care   | Maintenance Supplies - Seed/Sod/Sprigs   |
| CTE Supplies - Criminal Justice  | Maintenance Supplies - Parts - Grounds Equip   |
| CTE Supplies - Floral Design   | Maintenance Supplies - Soils, Mulch, Amendments  |
| CTE Supplies - Bio Med   | Maintenance Supplies - Irrigation Parts/Supplies   |
| CTE Supplies - Agriculture   | Maintenance Supplies - Welding Supplies  |
| CTE Supplies - Auto Tech   | Maintenance Supplies - Locksmith   |
| Catering Services  | Maintenance Supplies - Misc  |
| Childcare Services   | Medical Supplies; EMT Supplies, bandages   |
| Choir Supplies   | Mobility equip / Wheelchairs / Lift chairs   |
| Communications & Media services  | Music instruments  |
| Contracted Services - Therapist  | Musical Instrument Repair  |
| Contracted Services - Judges   | Musical Supplies   |
| Contracted Services - Choreogs/Clinicians/Accompanist  | Network Cabling  |
| Contracted Services - Speakers   | Office Equipment and Supplies  |
| Contracted Services - Consultants  | Paper  |
| Contracted Services - Diagnosticians   | Playground Equipment & Supplies  |
| Contracted Services - Maintenance and Repairs  | Police and Security Equipment & Supplies   |
| Contracted Services - DJ Services  | Postage Meter Supplies   |
| Contracted Services - Charter Bus Services   | Printing   |
| Contracted Services - Staff Development  | Printing - Construction Documents  |
| Contracted Services - Web Based Services   | Printing Equipment and Supplies  |
| Contracted Services - Misc   | Promotional Supplies   |
| Contracted Services - Fire/Burglar Monitoring  | Prosthetic devices & hearing aids  |
| Contracted Services - Custodial Services   | Radio & Telephone Equipment  |
| Child Nutrition Equipment  | School/Campus Safety Supplies  |
| Copiers  | Security & Card Reader Access System   |
| Costume or Apparel Rental  | Security Systems   |
| Courier/Delivery Services  | Sewing Notions, Accessories & supplies   |
| Custodial Equipment & Supplies   | Shop Equipment and Supplies  |
| Custom Clothing (Screen Printing, Embroidery, Etc)   | Software   |
| Data Processing Services   | Specialized Equipment for the handicapped & disabled   |
| Document Disposal/Shredding  | Technology Supplies  |
| Drill Team Supplies  | Technology - Hardware  |
| Drug screening   | Technology - Repair Services   |
| Dry Cleaning services  | Technology - Software  |
| Engineering Services   | Television Equipment & accessories   |
| Environmental Services & Ecological Services   | Theatrical Services  |
| Fencing Material & Supplies  | Tires & Tubes  |
| Fencing Repair & Maintenance Services  | Toner and Ink  |
| Fire Extinguisher Inspection & Maint, Services   | Trash Disposal   |
| Fire Sprinkler System Maintenance Services   | Travel Agency Services   |
| Flags, Flag Poles, & accessories   | Uniform Rental Services  |
| Flowers, arrangements  | Uniforms - Band  |
| Food Service Supplies & Equipment  | Uniforms - Cheerleaders  |
| Food/Snacks  | Uniforms - Choir   |
| Foods - Bakery products, fresh   | Uniforms - Drill Team  |
| Foods - Dairy products, fresh  | Vehicle - Bus  |
| Foods - frozen   | Vehicle - Car, Truck, Van, SUV   |
| Foods - perishable, fruits & vegetables  | Vehicle - Parts & Supplies   |
| Foods - staples, grocery & misc. items   | Vehicle - Maint. & Repairs   |
| Fuel   | Vehicle - Rental   |
| Furniture; Classroom, Cafeteria, Libr., Lounge   | Vehicle - Towing   |
| Furniture; Office  | Vehicle - Inspections  |
| Graduation Supplies  | Window coverings   |
| Insect & Rodent Control Services   |  |
| The state of the s |  |
| Instructional Supplies - Gen.  | A STATE OF THE PARTY OF THE PAR |
| Instructional Supplies - Gen. Instructional Supplies - Special Educatior Instructional Supplies - Art  |  |

(Rev. October 2018) Department of the Treasury

## Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

| Internal  | Reve   | nue Service   | ► Go t  | o www.irs.gov/                          | FormW9 for instr                                | uctions and the late  | est infor               | mation.                 |                   |   |                  |                   |          |
|---|--|---|---|---|---|---|-------------------------|-------------------------|-------------------|---|------------------|-------------------|----------|
|   | 1 1  | lame (as shown                                      | on your income tax re                             | turn). Name is req                      | uired on this line; do                          | not leave this line blank   | ί.                      | -                       |                   | •   |                  |                   |          |
|   | 2 Business name/disregarded entity name, if different from above   |   |   |   |   |   |                         |                         |                   |   |                  |                   |          |
| Print or type. Specific Instructions on page 3. | 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC |   |   |   |   |   |                         |                         |                   | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) |                  |                   |          |
| ype   | Г  | 1 Limited liability                                 | v company Enter the t                             | tay classification (                    | C-C corporation S-1                             | S corporation P-Partne  | archin\ >               |                         | LXem              | p. payoo  | ,,               | · · · · · · · · · |          |
| Exempt payee code (if any)                      |  |   |   |   |   |   |                         | rting                   |                   |   |                  |                   |          |
| cifi.   | _  |   |   | d check the appro                       | priate box for the tax                          | classification of its own   | er.                     |                         | (Annlies          | s to accoun   | ts maintair      | ned outside       | the IIS) |
| be  | 5 A  | Other (see ins                                      | , street, and apt. or sui                         | ite no.) See instru                     | ctions.   |   | Reques                  | ter's name              |                   |   |                  |                   |          |
| See S   |  |   | ,,p   | ,                                       |   |   |                         |                         |                   | (-)   | ,                |                   |          |
| Š   | 6 (  | City, state, and Z                                  | IP code   |   |   |   | 1                       |                         |                   |   |                  |                   |          |
|   | 7 1  | ict account numb                                    | per(s) here (optional)                            |   |   |   |                         |                         |                   |   |                  |                   |          |
|   | , ,  | ist account num                                     | ber(s) fiere (optional)                           |   |   |   |                         |                         |                   |   |                  |                   |          |
| Par   |  | Taynav  | er Identificatio                                  | n Number (                              | TIN)  |   |                         |                         |                   |   |                  |                   |          |
|   |  |   |   |   |   | given on line 1 to a  | void                    | Social se               | curity r          | number  | -                |                   |          |
| backu<br>reside                                 | p wit<br>nt al   | thholding. For<br>ien, sole propi                   | individuals, this is g<br>rietor, or disregarded  | enerally your so<br>d entity, see the   | cial security numb<br>instructions for Pa       | er (SSN). However,<br>art I, later. For other   | for a                   |                         | ٦-                |   | ]_[              |                   |          |
| entitie<br>TIN, la                              |  | is your employ                                      | er identification nun                             | nber (EIN). If yo                       | u do not have a ni                              | ımber, see <i>How to g</i>  |                         | or                      |                   |   | J                |                   |          |
|   |  | e account is in                                     | more than one nam                                 | ne see the instr                        | uctions for line 1.                             | Also see What Name  |                         | Employe                 | r identi          | fication  | numbe            | er                |          |
|   |  |   | quester for guideline                             |   |   | nso see vinat ivame   | unu                     |                         | _                 |   | П                |                   |          |
| Par   | 3111   | Certific  | cation  |   |   |   |                         |                         |                   |   |                  |                   |          |
|   |  |   | ry, I certify that:                               |   |   |   |                         |                         |                   |   |                  |                   |          |
| 1. The<br>2. I an<br>Ser                        | nur<br>no<br>vice  | nber shown or<br>t subject to ba<br>(IRS) that I an | n this form is my cor<br>ckup withholding be      | cause: (a) I am withholding as a        | exempt from back                                | r (or I am waiting for<br>up withholding, or (b<br>to report all interest                               | ) I have r              | ot been r               | otified           | by the  | Interna          |                   |          |
| 3. I an   | nal  | J.S. citizen or                                     | other U.S. person (d                              | lefined below); a                       | and   |   |                         |                         |                   |   |                  |                   |          |
| 4. The  | FA   | TCA code(s) e                                       | ntered on this form                               | (if any) indicatin                      | g that I am exemp                               | from FATCA reporti  | ing is corr             | ect.                    |                   |   |                  |                   |          |
| you ha<br>acquis                                | ve fa  | ailed to report a<br>or abandonme                   | all interest and divide<br>int of secured propert | nds on your tax l<br>ty, cancellation o | return. For real estar<br>f debt, contributions | ified by the IRS that y<br>ate transactions, item<br>is to an individual retire<br>you must provide you | 2 does no<br>ement arra | ot apply. F<br>angement | or mort<br>(IRA), | tgage in<br>and ger   | terest presents, | paid,<br>payme    | nts      |
| Sign<br>Here                                    | X  | Signature of U.S. person >                          | 1   |   |   |   | Date ►                  |                         |                   | _   |                  |                   |          |
| Gei   | ne   | ral Instr   | uctions   |   |   | • Form 1099-DIV (of funds)  | dividends               | including               | those             | from st   | tocks (          | or mutu           | al       |
| Section noted.                                  |  | ferences are to                                     | the Internal Reven                                | ue Code unless                          | otherwise                                       | • Form 1099-MISC proceeds)  | (various                | types of in             | ncome,            | , prizes,   | , award          | ds, or g          | ross     |
| related   | Future developments. For the latest information about developments elated to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.   |   |   |   |   |   |                         |                         |                   |   |                  |                   |          |
| Dir   | 200  | se of For   | m   |   |   | • Form 1099-S (pro  |                         |                         |                   |   |                  | noosti -          | nc)      |
|   |  |   |   | who io rosulai                          | to file on                                      | <ul><li>Form 1099-K (me</li><li>Form 1098 (home</li></ul>   |                         |                         |                   | •   |                  |                   |          |
| An Ind  | IVIDL  | iai or entity (F                                    | orm W-9 requester)                                | wno is required                         | to file an                                      | • Form 1098 (nome   | mortgag                 | e merest                | , 1098            | -⊏ (Stuc  | Jeni 10          | an mer            | esi),    |

information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

· Form 1099-INT (interest earned or paid)

- 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

# Coldspring-Oakhurst CISD Conflict of Interest Questionnaire Instructions

Coldspring-Oakhurst CISD is required to comply with Texas Local Government Code Chapter 176, Disclosure of Certain Relationships with Local Government Officers. House Bill 23 significantly changed Chapter 176 as well as the required disclosure and the corresponding form. As of September 1, 2015, any vendor who does business with COCISD or who seeks to do business with COCISD must complet the new Conflict of Interest Questionnaire (CIQ) whether or not a conflict of interest exist. A conflict exists in the following situations:

- 1. If the <u>vendor</u> has an employment or other <u>business relationship</u> with a local government officer of COCISD or a family member of the officer, as described by section 176.003(a)(2)(A) of the Texas Local Government Code; or
- 2. If the vendor has given a local government officer of COCISD, or a family member of the officer, one or more gifts with the aggregate value of \$100, excluding any gift accepted by the officer or a family member of the officer if the gift is: (a) a political contribution as defined by Title 15 of the Election Code; or (b) a gift of food accepted as a guest; or
- 3. If the vendor has a family relationship with a local government officer of COCISD.

#### Definitions:

- <u>Vendor</u>: a person or company that enters or seeks to enter into a contract with COCISD for the sale of goods or services.
- <u>Business Relationship</u>: a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection base on: (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity; (B) a transaction conducted at a price and subject to terms available to the public; or (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency. *Texas Local Government Code 176.001(3)*.
- <u>Family Relationship</u>: a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code. *Texas Local Government Code 176.001(2-a)*.
- <u>Local Government Officer</u>: (A) a member of the COCISD Board of Trustees; (B) a
  superintendent, director, administrator, or other person designated as an executive officer; (C)
  an agent of COCISD who exercises discretion in the planning, recommending, selecting, or
  contracting of a vendor.

# If no conflict of interest exist: You must fill out Box 1 and type "N/A" in Box 3 of the CIQ form, sign and date the form.

In the event of a change in circumstances, an updated CIQ must be filed within seven (7) business days after the vendor becomes aware that a conflict of interest exists.

### **CONFLICT OF INTEREST QUESTIONNAIRE**

FORM CIQ

| For vendor doing business with local governmental entity   |                                |
|--|--------------------------------|
| This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.  | OFFICE USE ONLY                |
| This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).                         | Date Received                  |
| By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. <i>See</i> Section 176.006(a-1), Local Government Code. |                                |
| A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.   | ž                              |
| Name of vendor who has a business relationship with local governmental entity.   |                                |
| Check this box if you are filing an update to a previously filed questionnaire.  |                                |
| (The law requires that you file an updated completed questionnaire with the app later than the 7th business day after the date on which you became aware that the orig incomplete or inaccurate.)  |                                |
| Name of local government officer about whom the information in this section is being discl   | osed.                          |
|  |                                |
| Name of Officer  |                                |
| Name of Officer  |                                |
| This section (item 3 including subparts A, B, C, & D) must be completed for each officer we employment or other business relationship as defined by Section 176.001(1-a), Local Governipages to this Form CIQ as necessary.  |                                |
| A. Is the local government officer named in this section receiving or likely to receive taxable in income, from the vendor?  | ncome, other than investment   |
| Yes No   | a .                            |
| B. Is the vendor receiving or likely to receive taxable income, other than investment income, from government officer named in this section AND the taxable income is not received from the local content.   |                                |
| Yes No   |                                |
| C. Is the filer of this questionnaire employed by a corporation or other business entity wit government officer serves as an officer or director, or holds an ownership interest of one percentage.  |                                |
| Yes No   |                                |
| D. Describe each employment or business and family relationship with the local government  | officer named in this section. |
|  |                                |
|  |                                |
| Signature of vendor doing business with the governmental entity D  | ate                            |

### **INSURANCE REQUIREMENTS**

The Contractor/Bidder shall purchase and maintain in force the following kinds of insurance of companies acceptable to the Buyer:

- 1. Employers Insurance: Workmen's Compensation in the minimum statutory limit of liability and Employers Liability in the minimum amount of \$500,000.00.
- 2. Commercial General Liability: Said liability Insurance shall include Coverage A for Bodily Injury and Property Damage, including Premises/Operations, Products/Completed Operations, Independent Contractors, XCU, Blanket Contractual, Fire Damage Legal Liability, Board Form Property Damage, Host Liquor, Incidental Medical Malpractice, Non- Owned Watercraft and Extended Bodily Injury: Coverage B for Personal/Advertising Injury; and Coverage c for Medical Payments. Maintain Completed Operations Liability for at least two years after the date of final completion. Said insurance shall be in the minimum amounts as follows:

| a) | General Aggregate                             | \$1,500,000.00 |
|----|---|----------------|
|    | (Other than Products/Completed Operations)    |                |
| b) | Products/Completed Operations Aggregate Limit | \$1,000,000.00 |
| c) | Personal and Advertising Injury Limit         | \$1,000,000.00 |
| d) | Each Occurrence Limit                         | \$1,000,000.00 |
| e) | Fire Damage Limit (any one fire)              | \$ 50,000.00   |
| f) | Medical Expense Limit (any one person)        | \$ 5,000.00    |

3. Comprehensive Auto Liability: Said insurance coverage shall include non-ownership and hired care coverage as well as owned vehicle in the following minimum amounts:

Bodily Injury and Property Damage: \$1,000,000.00 combined single limit.

- 4. Owner's Insurance: Carry and pay for Owner's Protective Liability Insurance in the same amounts as specified above for the Contractor's General Liability.
- 5. Umbrella Liability Insurance: Said liability shall be written in addition to the limits and coverage as show for Employer Insurance; Commercial Liability Insurance; Comprehensive Automobile Liability; and Owners Insurance with the following minimum amounts:

| a) | General Aggregate Limit                     | \$2,000,000.00 |
|----|---|----------------|
| b) | Product/Completed Operation Aggregate Limit | \$2,000,000.00 |
| c) | Bodily Injury by Disease Aggregate Limit    | \$2,000,000.00 |
| d) | Each Occurrence Limit                       | \$2,000,000,00 |

I hereby certify that the Seller/Contractor has met insurance requirements as stated above with the following insurance company:

| Insurance Company Name:                |  |
|--|--|
| Address:                               |  |
| City/State/Zip                         |  |
| Insurance Co Contact and Phone Number: |  |
| Name of Seller: Policy No.:            |  |
| Signature                              |  |
| Name (print)                           |  |
| Title:                                 |  |
| Date:                                  |  |

### **CERTIFICATE OF INTERESTED PARTIES DISCLOSURE**

https://www.ethics.state.tx.us/whatsnew/FAQ Form1295.html https://www.ethics.state.tx.us/whatsnew/elf info form1295.htm

The proposer is responsible for first electronically filing Form 1295 with the Texas Ethics Commission. The filing process creates a certification of filing and a completed Form 1295 that must be printed, signed by an authorized agent of the business entity, and submitted to the Owner.

After the Owner receives the certification of filing with the completed Form 1295, the Owner will notify the Commission, in an electronic format prescribed by the Texas Ethics Commission, of the receipt of those documents within 30 days after receipt. The Owner cannot enter into a contract for this Project unless the Proposer submits a disclosure.

### **CERTIFICATE OF RESIDENCY**

The State of Texas has passed a law concerning non-resident Companies. This law can be found in Texas Education Code under Chapter 2252, Subchapter A. This law makes it necessary for

| NGSD to determine the residency of its bidders/proposers for construction related services. In part, this law reads as follows:   |
|---|
| "Section: 2252.001  |
| (3) "Non-resident bidder" refers to a person who is not a resident.   |
| (4) "Resident bidder" refers to a person whose principal place of business is in this state, including a Company whose ultimate parent company or majority owner has its principal place of business in this state.   |
| Section: 2252.002   |
| "A governmental entity may not award a governmental contract to a nonresident bidder unless the nonresident underbids the lowest bid submitted by a responsible resident bidder by an amount that is not less than the amount by which a resident bidder would be required to underbid the nonresident bidder to obtain a comparable contract in the state in which the nonresidents principal place of business is located." |
| I certify that.   |
| (Name of Company  |
| Bidding/Proposing) is, under Section: 2252.001(3) and (4), a  |
| Resident Bidder/Proposer Non-resident Bidder/Proposer   |
| My or Our principal place of business under Section: 2252.001(3) and (4), is in the city of   |
| In the state of   |
|   |
|   |
| Signature of Authorized Company Representative  |
| Print Name  |

Date

Title

### **CONTRACTOR CERTIFICATIONS REQUIRED BY TEXAS**

| Contractor Name:  |   |
|---|---|
| Name of Contract:   |   |
| Date of Contract:   |   |
|   |   |
| <ol> <li>If Contractor is a "Company" as defined by Texas Government Code §86 certifies that it does not (1) boycott Israel and (2) will not boycott Israel Agreement with the District. The Term "boycott" is defined in Texas §808.001 and means refusing to deal with, terminating business activities taking any action that is intended to penalize, inflict economic harm on relations specifically with Israel, or with a person or entity doing busined Israeli-controlled territory, but does not include an action made for order.</li> </ol> | I during the term of any<br>Government Code<br>les with, or otherwise<br>, or limit commercial<br>ss in Israel or in an |
| 2. In accordance with Texas Government Code Chapter 2252, Subchapter prohibited from entering into a contract with a company that is identification maintained by the Texas Comptroller or the State of Pension Review Both that it is not a company on a list prepared and maintained under Texas □806.051, 807.051, or 2252.153 and further hereby voluntarily and known and agrees that the above-noted agreement or contract shall be null ar leading the District to believe that the Contractor was a listed company procurement.                 | ed on a list prepared and pard. Contractor certifies Government Code owingly acknowledges and void should facts arise   |
| On behalf of Contractor: Date:  |   |
| ——————————————————————————————————————  |   |

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

### CERTIFICATION OF COMPLIANCE REGARDING TEXAS FAMILY CODE

AS per Section 14.52 of the Texas Family Code, added by S.B. 84, Acts, 73rd Legislature, R.S. (1993), all bidders must complete and submit with the bid the following affidavit:

I, the undersigned vendor, do hereby acknowledge that NO sole proprietor, partner, majority shareholder of a corporation, or an owner of 10% or more of another business entity is 30 days or more delinquent in paying child support under a court order or a written repayment agreement. I understand that under this doe, a sole proprietorship, partnership, corporation or other entity in which a sole proprietor, partner, majority shareholder or a corporation, or an owner of 10% or more of another entity is 30 days or more delinquent in paying child support under a court order or a written repayment agreement is NOT eligible to bid or receive a state contract.

### **CERTIFICATION OF NON-COLLUSION STATEMENT**

The respondent certifies under penalty of perjury that their response is in all respects bona fide, fair, and made without collusion or fraud with any person, joint venture, partnership, corporation or other business or legal entity.

The Proposer agrees to comply with all Federal, State, and local laws, rules, regulations and ordinances, as applicable. It is further acknowledged that Proposer certifies compliance with all provisions, laws, acts, regulations, etc. as noted above.

| Organization Name                                   |   | Address, City, State, and Zip Code |
|---|---|------------------------------------|
| Phone & Fax   | 5 | Email Address                      |
| Printed Name and Title of Authorized Representative |   |                                    |
| Signature Date                                      |   |                                    |

### **EDGAR CERTIFICATIONS** ADDENDUM FOR CONTRACT FUNDED BY U.S. FEDERAL GRANT

The following certifications and provisions are required and apply when Coldspring-Oakhurst CISD ("COCISD") expends federal funds for any contract resulting from this procurement process. Accordingly, the parties agree that the following terms and conditions apply to the Contract between the District and [ ("Vendor") in all situations where Vendor has been paid or will be paid with federal funds:

### REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS APPENDIX II TO 2 CFR PART 200

(A) Contracts for more than the simplified acquisition threshold currently set at \$150,000, which is the inflation adjusted amount determined by the Civilian Agency Acquisition Council and the Defense Acquisition Regulations Council (Councils) as authorized by 41 U.S.C. 1908, must address administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms, and provide for such sanctions and penalties as appropriate.

best interest.

Pursuant to Federal Rule (A) above, when COCISD expends federal funds, COCISD reserves all rights and privileges under the applicable laws and regulations with respect to this procurement in the event of breach of contract by either party.

|     | The second secon  |
|-----|---|
|     | Does Vendor agree? YESInitials of Authorized Representative of Vendor   |
| . , | nination for cause and for convenience by the grantee or subgrantee including the manner by which it will be<br>I and the basis for settlement. (All contracts in excess of \$10,000)   |
|     | Pursuant to Federal Rule (B) above, when COCISD expends federal funds, COCISD reserves the right to immediately terminate any agreement in excess of \$10,000 resulting from this procurement process in the event of a breach or default of the agreement by Vendes in the event Vendes follows and the country vendes in the event ve |

Initials of Authorized Representative of Vendor

Pursuant to Federal F immediately terminate of a breach or default of the agreement by Vendor in the event Vendor fails to: (1) meet schedules, deadlines, and/ or delivery dates within the time specified in the procurement solicitation, contract, and/or a purchase order; (2) make any payments owed; or (3) otherwise perform in accordance with the contract and/or the procurement solicitation. COCISD also reserves the right to terminate the contract immediately, with written notice to vendor, for convenience, if COCISD believes, in its sole discretion that it is in the best interest of COCISD to do so. Vendor will be compensated for work performed and accepted and goods accepted by COCISD as of the termination date if the contract is terminated for convenience of COCISD. Any award under this procurement process is not exclusive and NCISD reserves the right to purchase goods and services from other vendors when it is

(C) Equal Employment Opportunity, Except as otherwise provided under 41 CFR Part 60, all contracts that meet the definition of "federally assisted construction contract" in 41 CFR Part 60-1.3 must include the equal opportunity clause provided under 41 CFR 60-1.4(b), in accordance with Executive Order 11246, "Equal Employment Opportunity" (30 FR 12319, 12935, 3 CFR Part, 1964-1965 Comp., p. 339), as amended by Executive Order 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and implementing regulations at 41 CFR part 60, "Office of Federal

Contract Compliance Programs, Equal Employment Opportunity, Department of Labor." Pursuant to Federal Rule (C) above, when COCISD expends federal funds on any federally assisted

construction contract, the equal opportunity clause is incorporated by reference herein.

Does Vendor agree? YES

Does Vendor agree to abide by the above? YES Initials of Authorized Representative of Vendor

(D) Davis-Bacon Act, as amended (40 U.S.C. 3141-3148), When required by Federal program legislation, all prime construction contracts in excess of \$2,000 awarded by non-Federal entities must include a provision for compliance with the Davis-Bacon Act (40 U.S.C. 3141-3144, and 3146-3148) as supplemented by Department of Labor regulations (29 CFR Part 5, "Labor Standards Provisions Applicable to Contracts Covering Federally Financed and Assisted Construction"). In accordance with the statute, contractors must be required to pay wages to laborers and mechanics at a rate not less than the prevailing wages specified in a wage determination made by the Secretary of Labor. In addition, contractors must be required to pay wages not less than once a week. The non-Federal entity must place a copy of the current prevailing wage determination issued by the Department of Labor in each solicitation. The decision

to award a contract or subcontract must be conditioned upon the acceptance of the wage determination. The non-Federal entity must report all suspected or reported violations to the Federal awarding agency. The contracts must also include a provision for compliance with the Copeland "Anti-Kickback" Act (40 U.S.C. 3145), as supplemented by Department of Labor regulations (29 CFR Part 3, "Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States"). The Act provides that each contractor or subrecipient must be prohibited from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he or she is otherwise entitled. The non-Federal entity must report all suspected or reported violations to the Federal awarding agency.

| Pursuant to Federal Rule ( | D) above, when COCISD expends federa        | al funds during the term of an award for all   |
|----------------------------|---|--|
| contracts and subgrants fo | r construction or repair, Vendor will be in | compliance with all applicable Davis-Bacon Act |
| provisions.                | Does Vendor agree? YES                      | Initials of Authorized Representative of Vendo |

(E) Contract Work Hours and Safety Standards Act (40 U.S.C. 3701-3708). Where applicable, all contracts awarded by the non-Federal entity in excess of \$100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5). Under 40 U.S.C. 3702 of the Act, each contractor must be required to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than one and a half times the basic rate of pay for all hours worked in excess of 40 hours in the work week. The requirements of 40 U.S.C. 3704 are applicable to construction work and provide that no laborer or mechanic must be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous. These requirements do not apply to the purchases of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.

Pursuant to Federal Rule (E) above, when COCISD expends federal funds, Vendor certifies that Vendor will be in compliance with all applicable provisions of the Contract Work Hours and Safety Standards Act during the term of an award for all contracts by \_ISD resulting from this procurement process.

|  | Does Vendor agree? | YES | Initials of Authorized | Representative of Ven | dor |
|--|--------------------|-----|------------------------|-----------------------|-----|
|--|--------------------|-----|------------------------|-----------------------|-----|

(F) Rights to Inventions Made Under a Contract or Agreement. If the Federal award meets the definition of "funding agreement" under 37 CFR §401.2 (a) and the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that "funding agreement," the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the awarding agency.

Pursuant to Federal Rule (F) above, when federal funds are expended by COCISD, Vendor certifies that during the term of an award for all contracts by COCISD resulting from this procurement process, Vendor agrees to comply with all applicable requirements as referenced in Federal Rule (F) above.

| Does Vendor agree? YES | Initials of Authorized Representative of Vendor  |
|------------------------|--|
| Does vendor agree: TLS | initials of Authorized Representative of Vehicol |

(G) Clean Air Act (42 U.S.C. 7401-7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251-1387), as amended—Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401-7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251- 1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

Pursuant to Federal Rule (G) above, when federal funds are expended by COCISD, Vendor certifies that during the term of an award for all contracts by COCISD resulting from this procurement process, Vendor agrees to comply with all applicable requirements as referenced in Federal Rule (G) above.

| Does Vendor agree? YES   | Initials of Authorized Representative of Vendor  |
|--------------------------|--|
| Lines Vendor adree / YES | initials of Allinorized Representative of Vendor |
|                          |  |

(H) Debarment and Suspension (Executive Orders 12549 and 12689)—A contract award (see 2 CFR 180.220) must not be made to parties listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), "Debarment and Suspension." SAM Exclusions contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549.

Pursuant to Federal Rule (H) above, when federal funds are expended by COCISD, Vendor certifies that during the term of an award for all contracts by COCISD resulting from this procurement process, Vendor certifies that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation by any federal department or agency.

| Does Vendor agree? YESInitials of A | Authorized Representative of Vendor |
|-------------------------------------|-------------------------------------|
|-------------------------------------|-------------------------------------|

(I) Byrd Anti-Lobbying Amendment (31 U.S.C. 1352)—Contractors that apply or bid for an award exceeding \$100,000 must file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the non-Federal award.

Pursuant to Federal Rule (I) above, when federal funds are expended by COCISD, Vendor certifies that during the term and after the awarded term of an award for all contracts by COCISD resulting from this procurement process, the vendor certifies that it is in compliance with all applicable provisions of the Byrd Anti-Lobbying Amendment (31 U.S.C. 1352). The undersigned further certifies that:

- (1) No Federal appropriated funds have been paid or will be paid for on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the awarding of a Federal contract, the making of a Federal grant, the making of a Federal loan, the entering into a cooperative agreement, and the extension, continuation, renewal, amendment, or modification of a 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, an officer or employee of congress, or an employee of a Member of Congress in connection with this Federal grant 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 covered sub-awards exceeding \$100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.

| Does Vendor agree? YE | S Initials of | f Authorized Rei | presentative of | Vendo |
|-----------------------|---------------|------------------|-----------------|-------|
|                       |               |                  |                 |       |

- (J) Procurement of Recovered Materials When federal funds are expended, COCISD and its contractors must comply with section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act. The requirements of Section 6002 include: (1) procuring only items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR part 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired during the preceding fiscal year exceeded \$10,000;
- (2) procuring solid waste management services in a manner that maximizes energy and resource recovery; and (3) establishing an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

Pursuant to Federal Rule (J) above, when federal funds are expended by the District, as required by the Resource Conservation and Recovery Act of 1976 (42 U.S.C. § 6962(c)(3)(A)(i)), the vendor certifies, by signing

this document, that the percentage of recovered materials content for EPA-designated items to be delivered or used in the performance of the contract will be at least the amount required by the applicable contract specifications or other contractual requirements.

| Does vendor agree? YESInitials of Authorized Representative of vendor  |
|--|
| RECORD RETENTION REQUIREMENTS FOR CONTRACTS INVOLVING FEDERAL FUNDS  |
| When federal funds are expended by COCISD for any contract resulting from this procurement process, Vendor certifies that it will comply with the record retention requirements detailed in 2 CFR § 200.333. Vendor further certifies that it will retain all records as required by 2 CFR § 200.333 for a period of three years after grantees or subgrantees submit final expenditure reports or quarterly or annual financial reports, as applicable, and all other pending matters are closed.   |
| Does Vendor agree? YESInitials of Authorized Representative of Vendor  |
| CERTIFICATION OF COMPLIANCE WITH THE ENERGY POLICY AND CONSERVATION ACT  |
| When COCISD expends federal funds for any contract resulting from this procurement process, Vendor certifies that it will comply with the mandatory standards and policies relating to energy efficiency which are contained in the state energy conservation plan issued in compliance with the Energy Policy and Conservation Act (42 U.S.C. 6321 et seq.; 49 C.F.R. Part 18).   |
| Does Vendor agree? YES Initials of Authorized Representative of Vendor CERTIFICATION OF EQUAL EMPLOYMENT STATEMENT   |
| It is the policy of COCISD not to discriminate on the basis of race, color, national origin, gender, limited English proficiency or handicapping conditions in its programs. Vendor agrees not to discriminate against any employee or applicant for employment to be employed in the performance of this Contract, with respect to hire, tenure, terms, conditions and privileges of employment, or a matter directly or indirectly related to employment, because of age (except where based on a bona fide occupational qualification), sex (except where based on a bona fide occupational qualification) or race, color, religion, national origin, or ancestry. Vendor further agrees that every subcontract entered into for the performance of this Contract shall contain a provision requiring non-discrimination in employment herein specified, binding upon each subcontractor. Breach of this covenant may be regarded as a material breach of the Contract. |
| Does Vendor agree? YES Initials of Authorized Representative of Vendor   |
| CERTIFICATION OF COMPLIANCE WITH BUY AMERICA PROVISIONS  |
| COCISD has a preference for domestic end products for supplies acquired for use in the United States when spending federal funds (purchases that are made with non-federal funds or grants are excluded from the Buy America Act). Vendor certifies that it is in compliance with all applicable provisions of the Buy America Act.  |
| Does Vendor agree? YESInitials of Authorized Representative of Vendor  |
| CERTIFICATION OF ACCESS TO RECORDS - 2 C.F.R. § 200.336  |
| Vendor agrees that the District's Inspector General or any of their duly authorized representatives shall have access to any books, documents, papers and records of Vendor that are directly pertinent to Vendor's discharge of its obligations under the Contract for the purpose of making audits, examinations, excerpts, and transcriptions. The right also includes timely and reasonable access to Vendor's personnel for the purpose of interview and discussion relating to such documents.   |
| Does Vendor agree? YESInitials of Authorized Representative of Vendor  |
| CERTIFICATION OF APPLICABILITY TO SUBCONTRACTRS  |
| Vendor agrees that all contracts it awards pursuant to the Contract shall be bound by the foregoing terms and conditions.  |
| Does Vendor agree? YESInitials of Authorized Representative of Vendor  |

VENDOR AGREES TO COMPLY WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL LAWS, RULES, REGULATIONS, AND ORDINANCES. IT IS FURTHER ACKNOWLEDGED THAT VENDOR CERTIFIES COMPLIANCE WITH ALL PROVISIONS, LAWS, ACTS, REGULATIONS, ETC. AS SPECIFICALLY NOTED ABOVE.

| Vendor's Name:                                       | 16는 것은 그 한 사람들은 것은 것이 없었다. 기술이 있어요? |
|--|-------------------------------------|
| Address, City, State, and Zip Code:                  |                                     |
| Phone Number:  | Fax Number:                         |
| Printed Name and Title of Authorized Representative: |                                     |
| Email Address:                                       |                                     |
| Signature of Authorized Representative:              |                                     |
| Date:  |                                     |

### SUSPENSION AND DEBARMENT CERTIFICATION

Federal Law (A102 Common Rule and OMB Circular A-110) prohibits non-federal entities from contracting with or making sub-awards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement contracts for goods and services equal to or in excess of \$100,000 and all non-procurement transactions (e.g., sub-awards to sub-recipients).

Firms receiving individual awards of \$100,000 or more and all sub-recipients must certify that their organization and its principals are not suspended or debarred by a federal agency.

Before an award of \$100,000 or more can be made to your Company, you must certify that your organization and its principals are not suspended or debarred by a federal agency.

| I, the undersigned ag | ent for the Company named below, (check one)   |                              |
|-----------------------|--|------------------------------|
|                       | certify that neither this Company nor its principals federal agency.   | are suspended or debarred by |
|                       | certify that either the Company or its principals filing this bid <u>has been</u> suspended or debarred by a federal agency. |                              |
|                       |  |                              |
| Name of Company       |  |                              |
|                       |  |                              |
| Signature of Authoriz | ed Official  |                              |
|                       |  |                              |
| Printed Name          |  | Date                         |

# CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION LOWER TIER COVERED TRANSACTIONS

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7CFR Part 3017, Section 3017.510, Participant's responsibilities. The regulations are published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency with which this transaction originated.

| 1. | The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is |
|----|---|
|    | presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from                |
|    | participation in his transaction by any Federal Department or agency.   |

| 2. | Where the prospective lower tier participant is unable to certify to any of the statements in this |
|----|--|
|    | certification, such prospective participant shall attaché an explanation to this proposal.         |

| Organization Name                           |
|---|
| PR/ Award Number or Project Name            |
| Name and Title of Authorized Representative |
| Name and Title of Authorized Representative |
| Date  |

# CONTRACTOR'S CERTIFICATE REGARDING ALCOHOLIC BEVERAGE AND TOBACCO-FREE CAMPUS POLICY

The CONTRACTOR agrees that it will abide by and implement the DISTRICT's Alcoholic Beverage and Tobacco-Free Campus Policy, which prohibits the use of alcoholic beverages and tobacco products, at any time, on DISTRICT-owned or leased buildings, on DISTRICT property and in DISTRICT vehicles. The CONTRACTOR shall procure signs stating "ALCOHOLIC BEVERAGE AND TOBACCO USE IS PROHIBITED" and shall ensure that these signs are prominently displayed in all entrances to school property at all time

| Propose | r Certification for "Alcoholic Beverage and Toba | cco-Free Campus Policy:" |
|---------|--|--------------------------|
|         | YES, I Agree to the above                        | Initial                  |
|         | NO, I do NOT Agree to the above                  | Initial                  |

# CONTRACTOR'S CERTIFICATE REGARDING DRUG-FREE WORKPLACE

This Drug-Free Workplace Certification form is required from all successful Proposers pursuant to the requirements mandated by Government Code sections 8350 et. seq., the Drug-Free Workplace Act of 1990. The Drug-Free Workplace Act of 1990 requires that every person or organization awarded a contract or grant for the procurement of any property or service from any State agency must certify that it will provide a drug-free workplace by performing certain specified acts. In addition, the Act provides that each contract or grant awarded by a State agency may be subject to suspension of payments or termination of the contract or grant, and the CONTRACTOR or grantee may be subject to debarment from future contracting, if the contracting agency determines that specified acts have occurred.

Pursuant to Government Code section 8355, every person or organization awarded a contract or grant from a State agency shall certify that it will provide a drug-free workplace by doing all of the following:

- 1) Publishing a statement, notifying employees that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited in the person's or organization's workplace, and specifying actions which will be taken against employees for violations of the prohibition;
- 2) Establishing a drug-free awareness program to inform employees about all of the following:
  - a) The dangers of drug abuse in the workplace;
  - b) The person's or organization's policy of maintaining a drug-free workplace;
  - c) The availability of drug counseling, rehabilitation and employee-assistance programs; and
  - d) The penalties that may be imposed upon employees for drug abuse violations;
- 3) Requiring that each employee engaged in the performance of the contract or grant be given a copy of the statement required by subdivision (a) and that, as a condition of employment on the contract or grant, the employee agrees to abide by the terms of the statement.

I, the undersigned, agree to fulfill the terms and requirements of Government Code section 8355 listed above and will (a) publish a statement notifying employees concerning the prohibition of controlled substance at the workplace, (b) establish a drug-free awareness program, and (c) require each employee engaged in the performance of the contact be given a copy of the statement required by section 8355(a) and require such employee agree to abide by the terms of that statement.

I also understand that if the DISTRICT determines that I have either (a) made a false certification herein, or (b) violated this certification by failing to carry out the requirements of section 8355, that the contract awarded herein is subject to termination, suspension of payments, or both. I further understand that, should I violate the terms of the Drug-Free Workplace Act of 1990, I may be subject to debarment in accordance with the requirements of sections 8350 et. seq.

I acknowledge that I am aware of the provisions of Government Code sections 8350 <u>et. seq.</u> and hereby certify that I will adhere to the requirements of the Drug-Free Workplace Act of 1990.

| Proposer | Certification for "Drug-Free Workplace:" |          |
|----------|--|----------|
|          | YES, I Agree to the above                | Initial: |
|          | NO, I do NOT Agree to the above          | Initial: |

Drug-Free Workplace: 38 CFR § 48.635

### STATEMENT OF NON-COLLUSION AND NON-DISRIMINIATION

My signature certifies that the accompanying bid/proposal:

1. Is not the result of, or affected by an unlawful act of collusion with another person or company engaged in the same line of business or commerce, or any act of fraud punishable under current local, state, and/or

Federal ordinances, statutes, regulations, and/or policies. Furthermore, I understand that fraud and unlawful collusion are crimes under Federal Law, and can result in fines, prison sentences, and civil damage awards.

- 2. During the performance of any contracted awarded, the Seller will not discriminate against any employee or applicant for employment because of race, religions, color, sex or national origin, or handicaps, except where religion, sex, or national origin is a bona fide occupational qualification reasonable necessary to the normal operations of the Seller. The Seller agrees to prost in conspicuous places, available to employees and applicants for employment, notice setting forth the provisions of this non-discrimination clause.
- 3. The Seller, in all solicitations and advertisements for employees placed by, or on behalf of, the Seller, will state such Seller is an equal opportunity employer.
- 4. Notices, advertisements, and solicitations places in accordance with Federal Law, rule, or regulation, shall be deemed sufficient for the purpose of meeting the requirements of this section.
- 5. The Seller shall include that provisions of the foregoing paragraphs 2,3, and 4 in every subcontract or purchases over \$10,000.00 so that the provisions will be binding upon each subcontractor or vendor.

I hereby certify that I am authorized to sign as a Representative for the Seller/Contractor:

| е |  |
|---|--|
|   |  |
|   |  |

### **BUY AMERICAN PROVISION CERTIFICATION**

This Certification is required for all items domestically grown and processed in the United States, which exceeds 50% domestic end product. Proposers is to provide certification for all products derived from domestic products to include Fruit, Vegetables, Grains, Legumes and Oil based products. Failure to certify such items may disqualify award of such line item.

Vendor certifies that vendor complies with all applicable provisions of the Buy American Act. The Buy American Provision requires school food authorities to schools to purchase, to the maximum extent practicable, domestic commodities or products. For a product to meet the Buy American requirement, over 51% of the final processed product (by weight or volume) must consist of agricultural commodities that were grown domestically, and processed domestically. Unprocessed foods must be 100% domestic. See 7 CFR § 210.21(d), and USDA-FNS memo SP 38-2017 Compliance with and Enforcement of the Buy American Provision in the National School Lunch Program. The Buy American provision applies to all purchases made with School Nutrition Program (SNP) funds. Purchases made in accordance with the Buy American Provision must still follow the applicable procurement rules calling for full and open competition.

| Proposer Certification, Compliance with Buy A   | merican Provision:  |  |  |
|---|---|--|--|
| YES, Vendor certifies products bi   | d comply with the above.  |  |  |
| NO, Vendor certifies not all products bid comply with the above.  Any exception to the Buy American Provision must be noted on the provided attachment in this solicitation |   |  |  |
| for Buy American Deviations for each food a   | nd/or beverage item.  |  |  |
| Every effort shall be made to follow the Buy Am   | nerican Provision required by the National School Lunch Act to      |  |  |
| include domestically grown products in school f   | ood programs. By signing this certification, the <u>Proposer is</u> |  |  |
| acknowledging the Buy American requirement  | s per Instructions and Information.                                 |  |  |
| Company Name:   | _   |  |  |
| Proposer Certification for "Buy American Provi  | sion:"  |  |  |
| YES,   Agree to the above   | Initial:  |  |  |
| I do NOT Agree to the above   | Initial:  |  |  |

### "BUY AMERICAN" WAIVER EXCEPTION LIST

This documentation is required for all food items that are not produced and processed in the U.S. with at least 51% of its agricultural food components, by weight or volume, from the U.S. The Buy American regulations states:

The "Buy American" provisions of Public Law (p.L.) 105-336 under the Richard B. Russell National School Lunch Act allows for an exception when the recipient agency determines that the following instances apply to non-domestic produced products:

- a. There is no domestic alternative source or substitute food product.
- b. Domestic product is not available in the specified quantity or quality.
- c. The cost difference of domestic product vs non-domestic is unreasonable.

(53 FR 27476, July 21, 1988, as amended at 58 FR 39122, July 22, 1996; 67 FR 65015, Oct. 23, 2002)

### PLEASE COMPLETE THE BUY AMERICAN DEVIATIONS ATTACHMENT IN THIS RFP.

If any "domestic alternatives" are available, please provide the pricing comparison for all products on the attachment included in this RFP.

9a

# CONTRACTOR'S CERTIFICATE REGARDING WORKER'S COMPENSATION

(To be executed by Vendor and Submitted with Proposal)

Labor Code section 3700 in relevant part provides:

Every employer except the State shall secure the payment of compensation in one or more or the following ways:

- (a) By being insured against liability to pay compensation in one or more insurers duly authorized to write compensation insurance in this State.
- (b) By securing from the Director of Industrial Relations a certificate of consent to self-insure, which may be given upon furnishing proof satisfactory to the Director of Industrial Relations of ability to self-insure and to pay any compensation that may become due to his employees.

I am aware of the provisions of section 3700 of the Labor Code, which require every employer to be insured against liability for worker's compensation or to undertake self-insurance in accordance with the provisions of that code, and I will comply with such provisions before commencing the performance of work of this contract.

| Proposer Certification for "Worker's Compensation: |                                 |          |  |  |
|--|---------------------------------|----------|--|--|
|  | YES, I Agree to the above       | Initial: |  |  |
|  | NO, I do NOT Agree to the above | Initial: |  |  |

(In accordance with article 5 (commencing at section 1860), chapter 1, part 7, division 2 of the Labor Code, the above certificate must be signed and filed with the awarding body prior to performing any work under this contract.)

# HISTORICALLY UNDERUTILIZED BUSINESSES (HUB)- MINORITY & WOMEN'S BUSINESS ENTERPRISE (MWBE), SMALL BUSINESS ENTERPRISE (SBE), AND LABOR SURPLUS AREA (LSA) FIRM PARTICIPATION<sup>11</sup>

Per <u>2 CFR §200.321</u> contracting with MWBE, SBE, and LSA firms both as prime and subcontractors is encouraged.

- a. The non-Federal entity must take all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible.
  - b. Affirmative steps must include:
    - Placing qualified small and minority businesses and women's business enterprises on solicitation lists:
    - ii. Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
    - iii. Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
    - iv. Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises;
    - V. Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce; and
    - vi. Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (1) through (5) of this section.

The prime contractor must take the affirmative steps outlined above. It will be the responsibility of the prime contractor to pre-qualify and subcontractors offered as Small and Minority Business, Women's Business Enterprise, and Labor Surplus Area Firm participants. These entities must meet the same minimum standards and requirements as the prime contractor. Proposers shall indicate on their submitted proposals whether or not they are a Small and Minority Business, Women's Business Enterprise, or Labor Surplus Area Firm and with whom they are certified, e.g. City, State, Federal, and include a copy of the certificate(s)/documentation with the proposal response.

| I certify | my company is NOT a Historically Underutilize   | ed Busine | ess (HUB)               |  |
|-----------|---|-----------|-------------------------|--|
|           | I certify my company is a Historically Underutilized Business (HUB) in the following category (check all that apply): Attach copy of HUB or applicable certifications(s). |           |                         |  |
|           | Minority Owned Business   |           | Small Business          |  |
|           | Women Owned Business  |           | Labor Surplus Area Firm |  |
| Proposer  | Certification for "MWBE/SBE/LSA Particip  | oation:"  |                         |  |
|           | YES, I Agree to the above   |           | Initial:                |  |
|           | NO,I do NOT Agree   |           | Initial:                |  |

11 SMWBE: 2 CFR 200.321

# IRAN CONTRACTING ACT CERTIFICATION OF ELIGILITY TO PROPOSAL FOR CONTRACTS OF \$ 1 MILLION OR MORE (Public Contract Code sections 2202-2208)<sup>22</sup>

Pursuant to Public Contract Code 2204. (a) A public entity shall require a person that submits a proposal or proposal to, or otherwise proposes to enter into or renew a contract with, a public entity with respect to a contract for goods or seNices of one million dollars (\$1,000,000) or more to certify, at the time the proposal is submitted or the contract is renewed, that the person is not identified on a list created pursuant to subdivision (b) of Section 2203 as a person engaging in investment activities in Iran described in subdivision (a) of Section 2202.5, or as a person described in subdivision (b) of Section 2202.5, as applicable. A state agency shall submit the certification information to the Department of General SeNices.

To comply with this requirement, please insert your vendor or financial institution name and Federal ID Number (if available) and complete **one** of the options below. Please note: California law establishes penalties for providing false certifications, including civil penalties equal to the greater of \$250,000 or twice the amount of the contract for which the false certification was made; contract termination; and three-year ineligibility to proposal on contracts. (Public Contract Code section 2205.)

#### **OPTION #1 - CERTIFICATION**

I, the official named below, certify I am duly authorized to execute this certification on behalf of the vendor/financial institution identified below, and the vendor/financial institution identified below is **not** on the current list of persons engaged in investment activities in Iran created by DGS and is not a financial institution extending twenty million dollars (\$20,000,000) or more in credit to another person/vendor, for 45 days or more, if that other person/vendor will use the credit to provide goods or seNices in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS.

| Vendor Name/Financial Institution (Printed) | Federal ID Number (or nla) |
|---|----------------------------|
| By (Authorized Signature)                   |                            |
| Printed Name and Title of Person Signing    |                            |
| Date Executed                               | Executed in (city, state)  |

#### **OPTION #2 - EXEMPTION**

Pursuant to Public Contract Code sections 2203(c) and (d), a public entity may permit a vendor/financial institution engaged in investment activities in Iran, on a case-by-case basis, to be eligible for, or to proposal on, submit a proposal for, or enters into or renews, a contract for goods and seNices.

If you have obtained an exemption from the certification requirement under the Iran Contracting Act. please fill out the information below, and attach documentation demonstrating the exemption approval.

| Vendor Name/Financial Institution (Printed) | Federal ID Number (or nla) |
|---|----------------------------|
| By (Authorized Signature)                   |                            |
| Printed Name and Title of Person Signing    | Date Executed              |

# 10 FELONY CONVICTION NOTIFICATION

State of Texas Legislative Senate Bill No. 1, Section 44.034, Notification of Criminal History, Subsection (a), states "a person or business entity that enters into a contract with a school district must give advance notice to the district if the person or owner or operator of the business entity has been convicted of a felony." The notice must include a general description of the conduct resulting in the conviction of a felony.

Subsection (b) states "a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract."

This notice is not required of a publicly held corporation.

| l, the undersigned for the firm named below, certify that the information concerning notification of felony convictions has been by me and the following information furnished is true to the best of my knowledge. |
|---|
| Company:  |
| Company Official:   |
| A. My firm is a publicly held corporation; therefore, this reporting requirement is not applicable.   |
| Signature of authorized agent:  |
|   |
| B. My firm is not owned or operated by anyone who has been convicted of a felony.   |
| Signature of authorized agent:  |
|   |
| C. My firm is owned or operated by the following individuals who has/have been convicted of a felony.   |
| Name of individual (s):   |
|   |
| Details of conviction (s):  |
| <del></del>   |
| Signature of authorized agent:  |
|   |

### **Instructions to Obtain Fingerprints Through DPS**

Vendors with less than 4 employees

Vendors with 4 or more employees on campus will sign form\* 15 & verify their own employees are compliant to be on NCISD property

## Step 1:OBTAIN SERVICE CODE FORM

Call the COCISD Business Office at 936.653.1115 and ask for the Service code form. This form has 2 numbers that you will need.

### Step 2: visit IdentoGO website

Visit Url <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Follow the instructions & enter the requested information. Enter the service code (beginning with 11)

You will also be asked to enter an ORI number (beginning with TX).

You will be given locations that are closest to you based on the zip code you enter.

You will be sent a confirmation email outlining your time and date of your ten-minute fingerprint appointment.

## Step 3:Go to Fingerprint Appointment

Bring your required form of ID and proper payment to your appointment.

### Step 4: Notify School District

Provide receipt or notification to purchasing department of successful appointment.

Make sure to provide forms\* 12b & 13 for all four employees.

\*

All forms can be found on our district website under departments, Purchasing www.newcaneyisd.org/page/366

### Step 1: ESTABLISH FACT CLEARINGHOUSE ACCESS

You will verify your employees through the DPS Fact Clearinghouse. First establish an account with the DPS for FACT Clearinghouse. Contact DPS to obtain the contractor packet. You can contact DPS by email or phone. State that you are a "public school district contractor" and that you need to have an account established for "DPS FACT clearinghouse access". Please include: Name, Address, Phone, and email address to be used for notification of FACT records and messages.

Email: FACT@txdps.state.tx.us

Phone: (512) 424-2474 option 1

DPS will send you the required paperwork that must be completed and returned to DPS. With this paperwork, you must also include a **letter from COCISD** (Included in the information from COCISD and is addressed to: TxDPS Crime Records Service Access & Dissemination Bureau). Be sure that you sign the letter and it is sign by a district administrator.

Access and Dissemination Bureau Texas Department of Public Safety Crime Records Service P.O. Box 149322 Austin, TX 78714-9322

Please Note: After you sign the DPS User Agreement for FACT and return the required paperwork that will be emailed to you, New Caney ISD will provide a Fingerprint Services (SERVICE CODE FORM) for you to register for a fingerprinting appointment. Follow the directions of the form by logging on or calling into IdentoGO and you will be able to schedule an appointment for the fingerprinting.

### Step 2: RECEIVING YOUR SERVICE CODE FORM AND SCHEDULING YOUR APPOINTMENT

If you are a general contractor (GC) or subcontractor (SC) your secure site account will first have to be approved and then an ORI number configured. You should receive a series of email messages from the secure site, but the process won't be completed until you receive the message notifying you that "You have a message in your message center." At this time you can log onto your account and retrieve your SERVICE CODE FORM from the message center on the secure site.

Companies, Vendors, GC's, & SC's will give the SERVICE CODE FORM to anyone who will be working on school grounds. Employees or subcontractors under you will make an appointment for fingerprinting using the SERVICE CODE number you give them (not the schools' number). They will visit IdentoGo, <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a>. They will need to bring their required form of ID and proper payment to your appointment.

Companies can use their secure site account to check their employees' backgrounds to make sure that they don't have any offenses that would keep them from working on school grounds. In the COCISD information packet, there are forms that must be signed by the company that certifies that the employees of the company have completed the fingerprinting process and that you (as the DPS account holder) will notify COCISD if there is a change in one of your employee's status.

### Step 3: AFTER YOU HAVE COMPLETED FINGERPRINTING

Once you have completed the fingerprinting process, you must notify the COCISD Purchasing Department. COCISD will make a copy of the receipt and return the original to you for your records. Once the entire contract is reviewed and signed by COCISD, you are able to provide services to the district. If for any reason your fingerprinting or criminal background check reveals any of the characteristics that do not meet the District's expectations, your approval as a contractor for COCISD will be denied. If you have additional employees that work for your company, it is your responsibility to insure that those employees are fingerprinted, monitor their records and notify COCISD if their approval status changes.

# DPS Computerized Criminal History (CCH) Verification (AGENCY COPY)

|  | knowledge that a Computerized Criminal               |  |  |  |
|--|--|--|--|--|
| APPLICANT or EMPLOYEE NAME (Please print)  |  |  |  |  |
| History (CCH) check may be performed by accessing the Texas Department of Public Safety Secur  |  |  |  |  |
| Website and may be based on <u>name and DOB</u> identifiers. (This is not a consent form, but serves a                                 |  |  |  |  |
| information for the applicant.) Authority for this agen  | cy to access an individual's criminal history data   |  |  |  |
| may be found in Texas Government Code 411; Subcha  | pter F.  |  |  |  |
| Name-based information is not an exact search  | h and only fingerprint record searches represent     |  |  |  |
| true identification to criminal history record information   | on (CHRI), therefore the organization conducting     |  |  |  |
| the criminal history check is not allowed to discuss with  | n me any CHRI obtained using the <u>name and DOB</u> |  |  |  |
| method. The agency may request that I also have  | e a fingerprint search performed to clear any        |  |  |  |
| misidentification based on the result of the name and D  | OB search.   |  |  |  |
| In order to complete the fingerprint process I   | must make an appointment with the Fingerprint        |  |  |  |
| Applicant Services of Texas (FAST) as instructed online at <a href="www.dps.texas.gov/Crime Record">www.dps.texas.gov/Crime Record</a> |  |  |  |  |
| Information/Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-467                                      |  |  |  |  |
| 2080, submit a full and complete set of fingerprints, r  |  |  |  |  |
| and pay a fee of \$25.00 to the fingerprinting services of   |  |  |  |  |
|  | on my fingerprint criminal history record may be     |  |  |  |
| •  | on my imgerprint criminal history record may be      |  |  |  |
| discussed with me.   |  |  |  |  |
| (This copy must remain on file by this age   | ncy. Required for future DPS Audits)                 |  |  |  |
|  |  |  |  |  |
| Signature of Contractor  | D.   |  |  |  |
|  | Please:<br>Check and Initial each Applicable Space   |  |  |  |
| Date   | CCH Report Printed:                                  |  |  |  |
| Coldspring-Oakhurst Consolidated Independent School District   |  |  |  |  |
| Agency Name (Please print)   | YES NO initial                                       |  |  |  |
|  | Purpose of CCH:                                      |  |  |  |
| John Kirkham  Agency Representative Name (Please print)  | Empl Vol/Contractor initial                          |  |  |  |
| Control Prints   | Date Printed: initial                                |  |  |  |
| Signature of Agency Representative   | Destroyed Date: initial                              |  |  |  |
|  |  |  |  |  |
|  | Retain in your files                                 |  |  |  |

Date

Rev. 12/2022

### Coldspring-Oakhurst CISD

Criminal History Authorization Information for Contractors

As part of your contract process, you will need to complete the following questions in order for COCISD Chief of Police to run a state-wide criminal history check: Last Name: Middle Initial: Social Security Number:\_\_\_\_\_ Date of Birth:\_\_\_\_\_ Place of Birth: City, County & State Male\_\_\_ Female\_\_\_ Ethnicity:\_\_\_\_\_ Driver's License Number:\_\_\_\_\_ Issuing State:\_\_\_\_ Expiration Date:\_\_\_\_\_ Have you ever used another name(s) including maiden name? No Yes If yes, please list:\_\_\_\_\_ Have you ever lived in another state (other than Texas) or country in the past? No Yes If yes, please list:\_\_\_\_\_ Have you ever been convicted of, pled guilty or no contest (nolo contend re) to, or received probation, suspension, or deferred adjudication for a felony or any offense Involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)? No\_\_\_\_ Yes \_\_\_\_ If yes, please explain: (A felony conviction is not an automatic bar to service with the district. The district will consider the nature, date, and relationship between the offense and the service for which you are applying.) Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? No\_\_\_\_ Yes\_\_\_\_ If yes, please explain: Coldspring-Oakhurst Consolidated Independent School District shall obtain the criminal history record information for each independent contractor, who in the opinion of the district, is a serious candidate and may be offered a contract with Coldspring-Oakhurst CISD. I hereby authorize any law enforcement agency, including a police department, the Texas Department of Public Safety and the Texas Department of Corrections, to release to this school district my complete criminal history record. I understand that the district is prohibited by Federal Regulations from providing me with a copy of my DPS criminal history record; however I further understand that upon my request, the district may quote to me data from the report. Thereafter, I have the right to challenge the accuracy of my DPS criminal history record. I understand the Information I am providing about age, sex, and race/ethnicity will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information. Print Name: Signature: Date:

## CERTIFICATION OF CRIMINAL HISTORY INFORMATION SUBMISSION BY CONTRACTOR OR SUBCONTRACTOR

Certifying Affidavit submitted to: Coldspring-Oakhurst CISD Name of School District: PO BOX 39 Mailing Address: Coldspring, Tx 77331 Project/Agreement: STATE OF TEXAS S COUNTY OF SAN JACINTO (1) The undersigned representative, on behalf of the contracting firm identified below, swears and affirms to Coldspring-Oakhurst Consolidated Independent School District (the "District") the following (please check the option that applies): Such firm has ensured that all employees of the contracting or subcontracting firm who (i) have or will have continuing duties related to the contracted services, and (ii) have or will have direct contact with students (substantial opportunity for verbal or physical interaction with students that is not supervised by a certified educator or other professional District employee) have submitted all information necessary for the LEE Fast Pass process, but such firm does not have access to the results of the criminal history search. If the public work involves an existing "instructional facility," as defined by Tex. Ed. Code §46.001, such firm certifies that (1) the public work area contains sanitary facilities and is separated from all areas used by students by a secure barrier fence that is not less than six feet in height; and (2) that the contractor has adopted a policy prohibiting employees, including subcontractor employees, from interacting with students or entering areas used by students, informs employees of the policy, and enforces the policy at the public work area. Such firm further certifies that it has an ongoing responsibility to make a reasonable effort to ensure that the aforementioned conditions/precautions continue to exist throughout the time that the contracted services are provided. No employees, including the undersigned, have or will have direct contact with students, as

defined by Tex. Admin Code §153.1101(7).

| (3) The undersigned firm swears and covenants that no present or future employee of the contracting        |  |  |  |
|--|--|--|--|
| firm, no present or future independent contractor, and no present or future employee or independent        |  |  |  |
| contractor of any subcontractor of the contracting firm, will provide services to the Project on a         |  |  |  |
| continuing basis that involve direct contact with students unless and until such employee's or independent |  |  |  |
| contractor's national criminal history record information has been received, reviewed, and verified by     |  |  |  |
| District, as required herein. In the event of an emergency, an employee or independent contractor who      |  |  |  |
| has not been previously certified may only provide services that involve direct contact with students if   |  |  |  |
| such employee is escorted by a District employee.  |  |  |  |
| such employee is escorted by a District employee.  |  |  |  |
| (4) The undersigned firm swears and covenants that, upon receipt of information, directly or indirectly,   |  |  |  |
| that any employee or independent contractor of the contracting firm has been convicted of an offense       |  |  |  |
| identified in Section 22.085 of the Texas Education Code or prohibited by District policy, the contracting |  |  |  |
| firm will immediately remove or cause the removal of such employee from the Project or scope of the        |  |  |  |
| Agreement and notify the District.   |  |  |  |
|  |  |  |  |
| (5) If applicable, the undersigned agrees that its use of the District's DPS LEE Pass account/number to    |  |  |  |
| obtain criminal history information in no way creates any agency relationship between the District and     |  |  |  |
| the undersigned or its employees.  |  |  |  |
|  |  |  |  |
| , being duly sworn, affirms and certifies that he/she is the   |  |  |  |
| (position) of (contracting firm),  |  |  |  |
| and that all statements and acknowledgements contained herein are true and correct, and that he/she has    |  |  |  |
| the authority to bind such firm to the covenants set out above.  |  |  |  |
|  |  |  |  |
| Noncompliance or misrepresentation regarding the certification may be grounds for contract termination.    |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| (Print name)   |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(Signature and Date)

#### 13b

### **CONTRACTOR'S CERTIFICATION**

Texas Education Code, Ch. 22, requires service contractors to obtain criminal history record information regarding covered employees and to certify to the District that they have done so. Covered employees with disqualifying convictions are prohibited from serving at a school district.

### **Definitions:**

Covered employees: All employees of a contractor who have or will have continuing duties related to the service to be performed at the District and have or will have direct contact with students. The District will be the final arbiter of what constitutes direct contact with students.

Disqualifying conviction: One of the following offenses, if at the time of the offense, the victim was under 18 or enrolled in a public school: (a) a felony offense under Title 5, Texas Penal Code; (b) an offense for which a defendant is required to register as a sex offender under Chapter 62, Texas Code of Criminal Procedure; or (c) an equivalent offense under federal law or the laws of another state.

| Or | behalf of ("Contractor"), I certify that [check one]:  |
|----|--|
| ]  | ] None of Contractor's employees are <i>covered employees</i> , as defined above.  |
| Or |  |
| ]  | ] Some or all of Contractor's employees are covered employees. If this box is Selected, I further certify that;  |
| 1. | Contractor has obtained all required criminal history record information, through the Texas Department of Public Safety, regarding its covered employees. None of the covered employees has a disqualifying conviction. Contractor has taken reasonable steps to ensure that its employees who are not covered employees do not have continuing duties related to the contract services or direct contact with students. |
| 2. | If Contractor receives information that a covered employee has a disqualifying conviction, Contractor will immediately remove the covered employee from contract duties and notify the District in writing within 3 business days.   |
| 3. | Upon request, Contractor will make available for the District's inspection the criminal history record information of any covered employee. If the District objects to the assignment of a covered employee on the basis of the covered employee's criminal history record information, Contractor agrees to discontinue using that covered employee to provide services at the District.                                |
| No | encompliance by Contractor with this certification may be grounds for contract termination.  |
| Co | ntractor's Signature Date  |

| CERTIFICATE OF INTE   | RESTED PARTIES   | FORM 129  |
|---|--|---|
| Complete Nos. 1 - 4 and 6 if the Complete Nos. 1, 2, 3, 5, and 6      | ere are interested parties.<br>if there are no interested parties              | OFFICE USE ONLY   |
| Name of business entity filing form, entity's place of business.      | and the city, state and country of the   | business  |
| 2 Name of governmental entity or state which the form is being filed. | e agency that is a party to the contra   | act for   |
| and provide a description of the serv                                 | sed by the governmental entity or sta<br>vices, goods, or other property to be | ite agency to track of identify the contract<br>provided updo the contract. |
| Name of Interested Party  | City, State, Country   | Nature of Interest (check applicable  |
| Name of interested Farty  | (place of business)  | Controlling Intermediary  |
|   | II.  |   |
|   | WWW. Ethic   |   |
|   | an.  |   |
|   | W.   |   |
|   | À,   |   |
|   | <b>7</b> ,   |   |
|   |  |   |
| 5 Check only if there is 100 interes                                  | ted Party.   |   |
| 6 UNSWORN DECLAR (7)DN  |  |   |
| My name is  | , and my   | date of birth is  |
| My address (street)   | ,  | (state) (zip code) (country)  |
| Lideviewe under penalty of perjury that the for                       | regoing is true and correct.   |   |
| Executed in County,   | State of, on the c   | day of, 20 (month) (year)   |
|   | Signature of author  | rized agent of contracting business entity (Declarant)                      |

**ADD ADDITIONAL PAGES AS NECESSARY** 

### **VENDOR INSTRUCTIONS TO COMPLETED FORM 1295 (4-STEPS)**

As a "business entity," all vendors must electronically complete the Texas Ethics Commission's Form 1295, which can be found at <a href="https://www.ethics.state.tx.us/whatsnew/elf">https://www.ethics.state.tx.us/whatsnew/elf</a> info form1295.htm.

- 1. All vendors must complete Form 1295, even if no interested parties exist
- 2. Print a copy of the completed form (ensure it has a computer-generated certification number in the "Office Use Only" box)
- 3. Have an authorized agent of the business entity sign the form
- 4. The completed Form 1295 with certification of filing, must be filed with TCISD by attaching the form to the proposal or contract being provided to the District