

Bid Time:	1:30 PM
Bid Date:	

All bid documents shall be emailed to **FMDCBids@oa.mo.gov**

SECTION 004113 - BID FORM

1.0	BID				
	A. From: (Bidder's Cor	mpany Name)			
	Sole Proprietorship/G	General Partnership LLC Limited Partnership Corporation Joint Venture			
	Address:				
	City, State, Zip				
	Phone:	Email: :			
	Federal ID Number:	Missouri Business Charter Number:			
	Contact Name:	Contact email:			
		herein after called the "Bidder".			
	B. To:	Director, Division of Facilities Management, Design and Construction Room 730, Harry S Truman State Office Building 301 West High Street Jefferson City, Missouri 65101			
		herein after called the "Owner."			
	C. For:	Replace Roof, Administration Building Hawthorn Children's Psychiatric Hospital St Louis, Missouri			
	D. Project Number:	M2416-01			
		hereinafter called the "Work."			
	E. Documents:	The undersigned, having examined and being familiar with the local conditions affecting the work and with the complete set of contract documents, including the Drawings, the Invitation For Bid, Instructions To Bidders, Statement of Bidders Qualifications, General Conditions, Supplement to General Conditions, and the technical specifications, including: addenda number through hereby proposes to perform the Work for the following:			
	F. Bid Amount:				
		Dollars (\$)			
2.0	MBE/WBE/SDVE PEI	RCENTAGE OF PARTICIPATION PROJECT GOALS			
	certified by the State Section 34.074, RSM	fic goals are: MBE 10%, WBE 10%, and SDVE 3%. NOTE: Only MBE/WBE firms of Missouri Office of Equal Opportunity, and SDVE(s) meeting the requirements of Mo, and 1 CSR 30-5.010, as of the date of bid opening can be used to satisfy the participation goals for this project.			
3.0	BID BOND				
	A Accompanying the l	oid is: 5% Bid Bond or Cashier's Check/Bank Draft for 5% of base bid that is			

payable without condition to the Division of Facilities Management, Design and Construction, State of Missouri, as per Article 5 of "Instructions To Bidders".

4.0 CONTRACT COMPLETION TIME AND LIQUIDATED DAMAGES

A. The Bidder agrees to complete the work within 120 working days from the date the Notice of Intent to Award is issued as modified by additional days added by the Owner's acceptance of alternates, if applicable. This includes ten (10) working days for document mailing and processing. The Bidder further agrees to pay to, or allow the State as liquidated damages the sum of \$700 for each working day thereafter that the entire work is not substantially complete.

5.0 ATTACHMENTS TO BID

004322	Unit Prices Form
004336	Proposed Subcontractors
004337	MBE/WBE/SDVE Compliance Form
004338	MBE/WBE/SDVE Joint Venture Form
004339	MBE/WBE/SDVE Waiver Form
004340	SDVE Business Form
004541	Affidavit of Work Authorization
004545	Anti-Discrimination Against Israel Act Certification form

6.0 BIDDER'S CERTIFICATIONS

By signing and submitting this bid form, the Bidder certifies as follows:

A. No Undisclosed Interests or Associations, Collusion, or Solicitation of Other Bidders

- 1. This bid is genuine and is not made in the interest of or on behalf of any undisclosed person, firm, or corporation, and is not submitted in conformity with any agreement or rules of any group, association or corporation.
- 2. The Bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham proposal.
- 3. The Bidder has not solicited or induced any person, firm or corporation to refrain from submitting a bid.
- 4. The Bidder has not sought by collusion or otherwise to obtain any advantage over any other bidder or over the Owner.

B. Accuracy of Contract Documents

The Bidder has based this bid upon an official/complete set of contract documents, either obtained from the Owner or from a secondary source known to the Bidder to have provided a complete and accurate set of contract documents. If the Bidder received the contract documents from such a secondary source, any errors or omissions in the contract documents shall be interpreted and construed in favor of the Owner and against the Bidder. This bid is based upon the conditions within Article 1.2 of the General Conditions.

C. Non-Discrimination

The Bidder will not discriminate against any employee or applicant for employment because of race, creed, color or national origin in the performance of the Work.

D. Prevailing Wage

MISSOURI PREVAILING WAGE LAW (Sections 290.210 to 290.340, RSMo): The Contractor shall pay not less than the specified hourly rate of wages, as set out in the wage order attached to and made part of the specifications for work under this contract, to all workers performing work under the contract, in accordance with sections 290.210 to 290.340, RSMo. The Contractor shall forfeit a penalty to the Owner of one hundred

dollars per day (or portion of a day) for each worker that is paid less than the specified rates for any work done under the contract by the Contractor or by any subcontractor, in accordance with section 290.250, RSMo.

DAVIS-BACON ACT: If this Project is financed in whole or in part from Federal funds (as indicated in the Instructions to Bidders or other bid or contract documents for this Project), then this contract shall be subject to all applicable federal labor statutes, rules and regulations, including provisions of the Davis-Bacon Act, 40 U.S.C. §3141 et seq., and the "Federal Labor Standards Provisions," as further set forth in Section 007333 – Supplementary General Conditions for Federally Funded/Assisted Construction Projects, which is incorporated into the contract by reference. Where the Missouri Prevailing Wage Law and the Davis-Bacon Act require payment of different wages for work performed under this contract, the Contractor and all Subcontractors shall pay the greater of the wages required under either law, on a classification-by-classification basis.

E. Transient Employers

The Bidder will comply with the provisions of Sections 285.230-234, RSMo, regarding transient employers.

F. Federal Work Authorization Program

The Bidder has enrolled and is participating in, and will continue to participate in, a federal work authorization program in accordance with Sections 285.525 and 285.530, RSMo for the duration of any contract awarded because of this bid.

G. Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA)

- 1. If awarded contract for this project, the Bidder/Contractor shall only utilize personnel authorized to work in the United States in accordance with applicable federal, state and local laws. This includes, but is not limited to, the Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA) and INA Section 274A.
- 2. If found to be in violation of this requirement or any applicable laws, and if the State of Missouri has reasonable cause to believe that the Contractor has knowingly employed individuals who are not eligible to work in the United States, the state shall have the right to cancel the contract immediately without penalty or recourse and suspend or debar the contractor from doing business with the state.
- 3. The Contractor agrees to cooperate fully with any audit or investigation from federal, state or local law enforcement agencies.

H. Anti-Discrimination Against Israel Act

- 1. If the awarded Contractor meets the definition of a company as defined in section 34.600, RSMo, and has ten or more employees, the Contractor shall not engage in a boycott of goods or services from the State of Israel; from companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or from persons or entities doing business in the State of Israel as defined in section 34.600, RSMo.
- 2. If, at any time during the life of the contract, Contractor meets the definition of a company as defined in section 34.600, RSMo, and the company's employees increases to ten or more OR the contractor's business status changes to become a company as defined in section 34.600, RSMo, and the company has ten or more employees, then the Contractor shall submit to the Division of Facilities Management, Design and Construction a completed Box C of the exhibit titled "Anti-Discrimination Against Israel Act Certification, and shall comply with the requirements of Box C.

7.0 SIGNATURES

ENERAL PARTNERSHIPS ONLY	
Name each general partner:	

I,, bei	ng the sole proprietor/general partner of (name of business)
	(and if the name of said business is other than my legal name, having filed a
Registration of Fictitious Name w	ith the Missouri Secretary of State in order to allow me to use such name in
connection with my business, as p	rovided by Section 417.200, RSMo, et seq.), do hereby submit this bid and agree to be
bound unto the State of Missouri a	as herein provided (if a general partnership, all partners must sign below).
Signature:	Signature:
Signature:	Signature:
FOR LIMITED LIABILITY CO	OMPANIES ONLY
Manager's (or Managing Member	today's dateState(s) of organization: 's) Name (printed)
Ι,	, being the Manager (or Managing Member) of (full legal name of limited
liability company from Articles of	Organization), and being duly
authorized to act as herein provide	ed on behalf of said limited liability company, do hereby submit this bid on behalf of
said limited liability company and	agree that said limited liability company shall be bound unto the State of Missouri as
herein provided.	
	Signature:
FOR LIMITED PARTNERSHI PARTNERSHIPS ONLY	PS/LIMITED LIABILITY PARTNERSHIPS/LIMITED LIABILITY LIMITED
	today's date:State(s) of organization:
General/Managing Partner's Name	e (printed)
I,	, being the General Partner/Managing Partner of (full legal name of limited
*	ership/limited liability limited partnership from partnership agreement or Certificate of
	, and being duly authorized to act as herein provided on
	limited liability partnership/limited liability limited partnership, do hereby submit this
•	ership/limited liability partnership/limited liability limited partnership and agree that
_	ability partnership/limited liability limited partnership shall be bound unto the State of
Missouri as herein provided.	ionity partitetisms, infinited nationity infinited partitetisms shall be bound anto the state of
Tribboarr as nerem provided.	
	Signature:
FOR CORPORATIONS ONLY	
President's Name (printed)	Secretary's Name (printed) Today's date
State(s) of incorporation:	
State(s) of incorporation.	

I,	, being the (officer or title)	of (full legal name of
corporation, from Articles	of Incorporation)	, and being duly
authorized by the Board of	Directors of said corporation to act as herein provide	ed on behalf of said corporation, do
hereby submit this bid on b	behalf of said corporation and agree that said corporat	tion shall be bound unto the State of
Missouri as herein provided	d.	
Signature:	Attested by:	
President	i	Corporate Secretary
	sign as the bidder. If the signator is other than the corporate preside legal authority to bind the corporation.	lent, the bidder must provide satisfactory evidence

FOR ASSOCIATIONS/JOINT VENTURES

If multiple business entities/individuals are bidding collectively as an association or joint venture, each business entity/individual bidding as part of the association or joint venture shall sign this bid in the above sections relevant to the form that such business entity or individual does business, and the bidder shall duplicate the necessary number of signature pages so that all members of the association or joint venture shall sign this bid. If a name is adopted for use by the association or joint venture, the association or joint venture shall file a Registration of Fictitious Name with the Missouri Secretary of State in order to use such name in connection with the association or joint venture, as provided by Section 417.200, RSMo, *et seq*.

1.0 Description

A. For changing specified quantities of work from those indicated by the contract drawings and specifications, upon written instructions of Owner, the following unit prices shall prevail. The unit prices include all labor, overhead and profit, materials, equipment, appliances, bailing, shoring, shoring removal, etc., to cover the finished work of the several kinds of work called for. Only a single unit price shall be given and it shall apply for either MORE or LESS work than that shown on the drawings and called for in the specifications or included in the Base Bid. In the event of more or less units than so indicated or included during construction the total contract price shall be decreased as appropriate or increased by contract change in accordance with General Conditions Article 4.1.

PROJECT NUMBER: M2416-01

2.0 Unit Prices

- A. Unit Price No. 1 Removal and replacement of damaged roof sheathing:
 - 1. Description: Remove damaged roof sheathing discovered during tear off of the existing shingle roofing system. Install new roof sheathing in areas where damaged roof sheathing has been removed in accordance with Section 061600 "SHEATHING".
 - 2. Unit of Measurement: Square foot
 - 3. Base Bid Quantity: 500 Square feet

-			~
Q.	ner	cubic	foot
Ψ	pci	Cubic	1001

- B. Unit Price No. 2 Removal and Replacement of wet roof insulation:
 - Description: Remove areas determined to contain wet insulation by infrared analysis.
 Match insulation thickness with new insulation and install base sheet over the top layer of insulation, according to Section 070150.73 "REHABILITATION OF MODIFIED BITUMINOUS MEMBRANE ROOFING.".
 - 2. Unit of Measurement: Square foot
 - 3. Base Bid Quantity: 1,400 Square feet

\$ \$per squ	are fo	oot
-		

SECTION 004336 - PROPOSED SUBCONTRACTORS

Project Number: M2416-01

Bidder's Company Name:

1.0 CONTRACTOR/SUBCONTRACTOR/MANUFACTURER/ SUPPLIER LIST

- For each category listed below, identify the subcontractor(s) who will perform the specified work and/or the manufacturer/supplier for the specified material or equipment, as applicable. If you plan to use your own employees to do any portion of the work, list yourself. If more than one firm will perform work in one category, you must identify both firms. Ą.
- After bid opening, no substitutions of the subcontractors, manufactures or suppliers listed below will be allowed except in accordance with Section 007200 - General Conditions, Article 3.1 and/or Article 3.7, as applicable. B.
- All manufacturers or suppliers required to be identified below must be an approved manufacturer or supplier as outlined in the bid specifications or in a written addenda in accordance with Section 4.0 of the Instructions to Bidders. <u>ن</u>
- If any category or work identified below is left vacant or if an unapproved manufacturer or supplier is listed, the bid shall be deemed nonresponsive and shall be rejected. D.
- The Bidder hereby certifies that the following will be used in the performance of the work: ц

DESCRIPTION OF WORK	SPECIFICATION DIVISION OR SECTION(S)	NAME OF FIRM FOR BASE BID WORK
Roofing Contractor	Division - 07	

SECTION 004337 - MBE/WBE/SDVE COMPLIANCE EVALUATION FORM

2. MBE/WBE/SDVE Firm: (Name) (Address) (City, State, Zip Code) (Phone Number) (email address) Type of Business: Type of Firm: MBE WBE SDVE Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Proj	ect Name:		Project I	No.: M2416-01
veteran-owned firm that will perform a commercially useful function on the contract. The undersigned submits the following data will respect to the following firm's assurance to meet the Office of Administration's goal for MBE/WBE/SDVE participation. 1. Name of General Contractor: 2. MBE/WBE/SDVE Firm: (Name) (Address) (City, State, Zip Code) (Phone Number) (email address) Type of Firm: MBE WBE SDVE Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: S	Con	struction with the bi	d submittal. Submit one form	per MBE/WBE/SDVE firm involved with	the project. This includes any
2. MBE/WBE/SDVE Firm: (Name) (Address) (City, State, Zip Code) (Phone Number) (email address) Type of Business: Type of Firm: MBE WBE SDVE Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (S) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	vete	eran-owned firm that v	vill perform a commercially use	ful function on the contract. The undersigned	d submits the following data with
(Name) (Address) (City, State, Zip Code) (Phone Number) (email address) Type of Business: Type of Firm: MBE SDVE Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (S) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1.	Name of General Co	ontractor:		
(Address) (City, State, Zip Code) (Phone Number) (email address) Type of Business: Type of Firm: MBE WBE SDVE Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (S) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2.				
(Phone Number) (email address) Type of Business:			(Name)		
Type of Business: Type of Firm: MBE WBE SDVE Type of Substitute SDVE Type of Firm: MBE WBE SDVE Type of Substitute SDVE Type of Substitute SDVE Type of Substitute SDVE Type of Substitute SDVE Type of Firm: MBE WBE SDVE Type of Substitute SDV			(Address)	(City, State, Zip Code)	
Officer Name & Title: 3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK: ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			(Phone Number)	(email address)	
3. Describe the subcontract actual work to be performed (List BASE BID work and any ALTERNATE work separately): BASE BID SCOPE OF WORK:	Тур	e of Business:		Type of Firm: MBE WE	BE □ SDVE
BASE BID SCOPE OF WORK: (identify separately) 4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (\$): (identify separately) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Offi	cer Name & Title:			
ALTERNATE (S) SCOPE OF WORK: (identify separately) 4. Indicate the dollar (S) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ \$ \$ S \$ \$ S \$ No Name of General Contractor Signee (Print): Signature:	3.	Describe the subcon	ntract actual work to be perforn	ned (List BASE BID work and any ALTERNA	TE work separately):
4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$ ALTERNATE (S): (identify separately) \$ \$ \$ \$ \$ S S S S Is the proposed subcontractor listed in the Minority/Women Business Enterprise Directory maintained by the Office of Equal Opportunity (OEO) or the Division of Purchasing's SDVE directory? YES NO Name of General Contractor Signee (Print): Signature:		BASE BID SCOPE	OF WORK:		
4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$		ALTERNATE (S)	SCOPE OF WORK: (identify s	eparately)	
4. Indicate the dollar (\$) amount of contract to be subcontracted to the MBE/WBE/SDVE Firm: BASE BID: \$					
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ALTERNATE (S): (identify separately) \$	4.	Indicate the dollar (\$) amount of contract to be subo	contracted to the MBE/WBE/SDVE Firm:	
\$\$\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$		BASE BID:	\$		
\$		ALTERNATE (S):			
\$ 5. Is the proposed subcontractor listed in the Minority/Women Business Enterprise Directory maintained by the Office of Equal Opportunity (OEO) or the Division of Purchasing's SDVE directory? Name of General Contractor Signee (Print): Signature:					
5. Is the proposed subcontractor listed in the Minority/Women Business Enterprise Directory maintained by the Office of Equal Opportunity (OEO) or the Division of Purchasing's SDVE directory? Name of General Contractor Signee (Print): Signature:					
Opportunity (OEO) or the Division of Purchasing's SDVE directory? YES NO Name of General Contractor Signee (Print): Signature:					
Signature:	5.				
Signature:					
Signature:		Name of Genera	al Contractor Signee (Print):		
		_			
Date:					

SECTION 004337 - MBE/WBE/SDVE COMPLIANCE EVALUATION FORM

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SECTION 004338 - MBE/WBE/SDVE ELIGIBILITY DETERMINATION FORM FOR JOINT VENTURES

ect	Name:		Project No.: M2416-01
		re, this form shall be completed a tt, Design and Construction.	and submitted with the bid submittal to the Missouri State Div
Jo	oint Venture Firm:		
		(Name)	
		(Address)	(City, State, Zip Code)
		(Phone Number)	(email address)
St	ate of Missouri pul	ed toward project MBE/WBE/SDVE blic entity or have proof of SDVE eli ation of each MBE/WBE/SDVE firn	goals, the MBE/WBE/SDVE partner(s) must be currently certified igibility. Identify the firms which comprise the joint venture and in a included in the joint venture.
_			
	(a) Describe the	e role of each MBE, WBE, or SDVE	firm in the joint venture:
	(b) Briefly des	scribe the experience and business qu	ualifications of each non-MBE/WBE/SDVE co-venturer:
W	That is the claimed	percentage of MBE/WBE/SDVE ow	nership in the joint venture?
O	wnership of join escribed in the jo	t venture. Attach a copy of the int venture agreement)	joint venture agreement. (The following need not be filled
(a)) Description of pr	rofit and loss sharing:	
	·		

SECTION 004338 – MBE/WBE/SDVE ELIGIBILITY DETERMINATION FORM FOR JOINT VENTURES

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(b) Description of capital contributions, including equipment:							
(c) Description of other applicable ownership interests:							
	responsible	for da	y-to-day management		irm" those individuals (and to		
□ Financial Decis □ Hiring (of man			anagement Decisions ing (of management)	□ Estimating □ Market: □ Purchase of majo			
Name	Race	Sex	Firm & Title	Responsibility	Management Decisions		
regulation, the cither directle	nere is any sig y or if the joir	nificant it ventur	change in the information in the is a subcontractor thro	ugh the prime contractor.	must inform the Commissioner,		
identify and ex venturer in the Administration therefore and a examination of venture, by aut misrepresentati	plain the tern undertaking, current, con ny proposed the books, r horized repro- ton will be gi	ns and Furth mplete change ecords, esentati rounds	operation of our joint er, the undersigned co and accurate informat es in any of the joint ve and files of the joint ve ves of the Commissio	venture and the intended payenant and agree to provide ion regarding actual joint venture arrangements and to venture, or those of each joiner of the Office of Admini	e the Commissioner, Office of enture work and the payment permit the audit and nt venturer relevant to the join		
me of Firm:				Name of Firm:			
				Signature:			
				Name:			
e:				Title:			
te:				Date:			

SECTION 004338 - MBE/WBE/SDVE ELIGIBILITY DETERMINATION FORM FOR JOINT VENTURES

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Date:		
State of:		
On this	day of	, 20, before me appeared
(name)	to me personall	ly known, who, being duly sworn, did execute the foregoing
affidavit, and did state that h	e or she was properly authorized by (name of	f firm)
to execute the affidavit and o	lid so as his or her own free act and deed.	
Notary Public:		(seal)
My commission ex	xpires:	
•		
Date:		
State of:		
On this	day of	, 20, before me appeared
		ly known, who, being duly sworn, did execute the foregoing
affidavit, and did state that h	e or she was properly authorized by (name of	f firm)
to execute the affidavit and o	did so as his or her own free act and deed.	
Notary Public:		(seal)
My commission ex	xpires:	

SECTION 004339 - GOOD FAITH EFFORT (GFE) DETERMINATION - MBE

Bidder may reach goals for each category as outlined in Section 001116 - Invitation to Bid by participation, GFE or a combination of both.

THIS PAGE IS FOR <u>MBE</u> $GFE \ ONLY$ Failure to submit for each diversity category on a separate page may

result in rejection of the bid.

INSTRUCTIONS: To meet full MBE GFE goals, refer to Section 002113-Instructions to Bidders providing at least 3 certified companies with all columns completed for each company.

If the bidder has identified companies with actual participation in Section 004337 - MBE/WBE/SDVE Compliance Form do not list those companies below as they will only be scored for participation, not GFE. Any questions or clarifications should be directed to the Contract Specialist of record. In order to be counted toward the goals, an MBE or WBE must be certified by the State of Missouri, Office of Equal Opportunity and an SDVE must be certified by the State of

Missouri, Office of Equal Opportunity or by the Veteran Small Business Administration.

DVE: https://oeo.mo.gov/sdve-certification-program/ or https://veterans.certify.sba.gov/#search	Project Number: M2416-01
MBE and WBE: https://apps1.mo.gov/MWBCertifiedFirms/_S	Bidder's Company Name:

Response from Subcontractor or Supplier			
Date of Contact			
Category of Work (e.g.: Electrician) or Type of Supplier (e.g.: Plumbing Supplier)			
Name of Firm and Person Contacted: Verify that firm is currently certified with Office of Equal Opportunity (OEO)			

SECTION 004339 - GOOD FAITH EFFORT (GFE) DETERMINATION - WBE

Bidder may reach goals for each category as outlined in Section 001116 - Invitation to Bid by participation, GFE or a combination of both.

THIS PAGE IS FOR WBE GFE ONLY Failure to submit for each diversity category on a separate page may result in rejection of the bid.

INSTRUCTIONS: To meet full WBE GFE goals, refer to Section 002113-Instructions to Bidders providing at least 3 certified companies with all columns completed for each company. If the bidder has identified companies with actual participation in Section 004337 - MBE/WBE/SDVE Compliance Form do not list those companies below as they will only be scored for participation, not GFE. Any questions or clarifications should be directed to the Contract Specialist of record.

In order to be counted toward the goals, an MBE or WBE must be certified by the State of Missouri, Office of Equal Opportunity and an SDVE must be certified by the State of Missouri, Office of Equal Opportunity or by the Veteran Small Business Administration.

MBE and WBE: https://apps1.mo.gov/MWBCertifiedFirms/ SDVE: https://oeo.mo.gov/sdve-certification-program/ or https://veterans.certify.sba.gov/#search

Bidder's Company Name:

Project Number: M2416-01

Response from Subcontractor or Supplier			
Date of Contact			
Category of Work (e.g.: Electrician) or Type of Supplier (e.g.: Plumbing Supplier)			
Name of Firm and Person Contacted: Verify that firm is currently certified with Office of Equal Opportunity (OEO)			

SECTION 004339 - GOOD FAITH EFFORT (GFE) DETERMINATION - SDVE

Bidder may reach goals for each category as outlined in Section 001116 - Invitation to Bid by participation, GFE or a combination of both.

THIS PAGE IS FOR SDVE

GFE ONLY

Failure to submit for each diversity

category on a separate page may

result in rejection of the bid.

INSTRUCTIONS: To meet full SDVE goals, refer to Section 002113-Instructions to Bidders providing at least 3 certified companies with all columns completed for each company. If the bidder has identified companies with actual participation in Section 004337 - MBE/WBE/SDVE Compliance Form do not list those companies below as they will only be scored for participation, not GFE. Any questions or clarifications should be directed to the Contract Specialist of record.

In order to be counted toward the goals, an MBE or WBE must be certified by the State of Missouri, Office of Equal Opportunity and an SDVE must be certified by the State of Missouri, Office of Equal Opportunity or by the Veteran Small Business Administration.

MBE and WBE: https://apps1.mo.gov/MWBCertifiedFirms/ SDVE: https://oeo.mo.gov/sdve-certification-program/ or https://veterans.certify.sba.gov/#search

Project Number: M2416-01 Bidder's Company Name:

Response from Subcontractor or Supplier			
Date of Contact			
Category of Work (e.g.: Electrician) or Type of Supplier (e.g.: Plumbing Supplier)			
Name of Firm and Person Contacted: Verify that firm is currently certified with Office of Equal Opportunity (OEO) or the federal U.S. Small Business Administration			

MISSOURI SERVICE-DISABLED VETERAN BUSINESS PREFERENCE FORM

Pursuant to section 34.074, RSMo, a service-disabled veteran business doing business as Missouri firm, corporation, or individual, or that maintains a Missouri office or place of business, shall receive a three-point bonus preference in the contract award process. The bonus preference will be calculated and applied by reducing the bid amount(s) of the eligible service-disabled veteran business by three percent of the apparent low responsive bidder's bid. This reduction is for evaluation purposes only, and will have no impact on the actual amount(s) of the bid or the amount(s) of any contract awarded. In order to be eligible for the service-disabled veteran business preference, the bidder must complete and submit this form with its bid.

Definitions (as provided by Section 34.074, RSMo):

Service-Disabled Veteran: any individual who is disabled as certified by the appropriate federal agency responsible for the administration of veterans' affairs.

Service-Disabled Veteran Business: a business concern:

- a. not less than fifty-one (51) percent of which is owned by one or more service-disabled veterans or, in the case of any publicly owned business, not less than fifty-one (51) percent of the stock of which is owned by one or more service-disabled veterans; and
- b. the management and daily business operations of which are controlled by one or more service-disabled veterans.

In order to receive the preference described above, the bidder must either be registered with the Office of Administration, Office of Equal Opportunity or the Veteran Small Business Administration or provide a copy of the bidder's discharge papers (DD Form 214, Certificate of Release from Active Duty). For ease of evaluation, it is preferred that proof of registration with Division of Purchasing or the VA be provided with this form. Discharge papers are not required if registered with Division of Purchasing or the VA.

By signing below, I certify that I meet the definitions of a service-disabled veteran and a service-disabled veteran business, as defined in Section 34.074, RSMo, and that I am either doing business as a Missouri firm, corporation, or individual; or maintain Missouri offices or places of business at the location(s) listed below.

Service-Disabled Veteran's Name

Service-Disabled Veteran Business Name

(Please Print)

Service-Disabled Veteran's Signature

Missouri Address of Service-Disabled Veteran Business

COUNT	ГҮ ОГ)					
		day of		, 20	0	, before me appo	eared
on the b		ry evidence to be a per					
sworn, o	deposed as follow	vs:					
	My name is			(Cont	ractor re	presentative), and	I am of sound
mind, ca	apable of making	this affidavit, and pers	sonally certify the	he facts herein state	d, as req	uired by Section 2	85.530, RSMo
to enter	into any contrac	et agreement with the s	state to perform	any job, task, emp	oloyment	, labor, personal s	ervices, or any
other ac	ctivity for which	compensation is provid	led, expected, o	r due, including but	t not lim	ited to all activities	s conducted by
business	s entities:						
	I am the		of				and I am duly
authoriz	zed, directed, and	title /or empowered to act o	fficially and pro	business name operly on behalf of t	this busir	ness entity.	
	I hereby affirm	and warrant that the	aforementioned	l business entity is	enrolled	l in a federal worl	k authorizatior
program	n operated by the	United States Departr	nent of Homela	and Security to verif	fy inforn	nation of newly his	red employees
and the	aforementioned b	ousiness entity shall par	rticipate in said	program with respe	ect to all	employees working	g in connection
with the	e contracted serv	vices related to	Drainet Number		wi	th the Office of A	Administration
Division	n of Facilities M	anagement, Design and	d Construction	(FMDC). I have at	ttached d	locumentation to t	his affidavit to
evidenc	e enrollment/par	ticipation by the afor	ementioned bu	siness entity in a	federal	work authorizatio	n program, as
required	d by Section 285.	530, RSMo.					
	In addition, I he	reby affirm and warrar	nt that the aforer	nentioned business	entity do	es not and shall no	ot knowingly
employ,	, in connection to	work under the within	state contract a	greement with FMI	OC, an al	ien who does not h	nave the legal
right or	authorization und	der federal law to work	in the United S	tates, as defined in	8 U.S.C.	§ 1324a(h)(3).	
	I am aware and	recognize that, unless	certain contract	and affidavit condit	tions are	satisfied pursuant	to Section
285.530), RSMo, the afor	ementioned business en	ntity may be hel	ld liable under Secti	ion 285.5	525 through 285.55	59, RSMo, for
subcont	ractors that know	ringly employ or contin	ue to employ a	ny unauthorized alie	en to wor	k within the state of	of Missouri.
	I acknowledge t	hat I am signing this at	fidavit as a free	act and deed of the	aforeme	entioned business e	entity and not
under di	•	8 8					3
				1 CC C.			
				Affiant Signature			
	Subscribed and	sworn to before me thi	s day of	f	, 20)	
			:	Notary Public		·	
My com	nmission expires:			inotary Public			

SECTION 004545 ANTI-DISCRIMINATION AGAINST ISRAEL ACT CERTIFICATION

<u>Statutory Requirement</u>: Section 34.600, RSMo, precludes entering into a contract with a company to acquire products and/or services "unless the contract includes a written certification that the company is not currently engaged in and shall not, for the duration of the contract, engage in a boycott of goods or services from the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel."

Exceptions: The statute provides two exceptions for this certification: 1) "contracts with a total potential value of less than one hundred thousand dollars" or 2) "contractors with fewer than ten employees." Therefore the following certification is required prior to any contract award.

Section 34.600, RSMo, defines the following terms:

Company - any for-profit or not-for-profit organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, limited liability company, or other entity or business association, including all wholly-owned subsidiaries, majority-owned subsidiaries, parent companies, or affiliates of those entities or business associations.

Boycott Israel and Boycott of the State of Israel - engaging in refusals to deal, terminating business activities, or other actions to discriminate against, inflict economic harm, or otherwise limit commercial relations specifically with the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel, that are all intended to support a boycott of the State of Israel. A company's statement that it is participating in boycotts of the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel, or that it has taken the boycott action at the request, in compliance with, or in furtherance of calls for a boycott of the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel shall be considered to be conclusive evidence that a company is participating in a boycott of the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel; provided, however that a company that has made no such statement may still be considered to be participating in a boycott of the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel if other factors warrant such a conclusion.

<u>Certification</u>: The vendor must therefore certify their current status by completing either Box A, Box B, or Box C on the next page of this Exhibit. (As used herein, "vendor" refers to any contractor or consultant entering into a contract with the Division of Facilities Management, Design and Construction. "Contract" is used generically to include both a contract for construction or agreement for design services.)

BOX A:	To be completed by any vendor that <u>does not meet the definition of "company"</u>	above,
	hereinafter referred to as "Non-Company."	

BOX B: To be completed by a vendor that meets the definition of "Company" but has <u>less than ten employees</u>.

BOX C: To be completed by a vendor that <u>meets the definition of "Company</u>" and <u>has ten or more employees</u>.

BOX A – NON-COM	MPANY ENTITY				
I certify that (Entity Name) currently DOES NOT MEET the definition of a company as defined in section 34.600, RSMo, but that if awarded a contract and the entity's business status changes during the life of the contract to become a "company" as defined in section 34.600, RSMo, and the entity has ten or more employees, then, prior to the delivery of any services and/or supplies as a company, the entity agrees to comply with, complete, and return Box C to the Division of Facilities Management, Design and Construction at that time.					
Authorized Representative's Name (Please Print)	Authorized Representative's Signature				
Entity Name	Date				
Zanty Italie	200				
BOX B – COMPANY ENTITY WITH	HIFS THAN TEN EMPLOYEES				
BUAD-COMPANY ENTITY WITE	I DIES I HAN I EN ENTE LOY EES				
I certify that (Company defined in section 34.600, RSMo, and currently has contract and if the company increases the number contract, then said company shall comply with, Facilities Management, Design and Construction a	of employees to ten or more during the life of the complete, and return Box C to the Division of				
Authorized Representative's Name (Please Print)	Authorized Representative's Signature				
Company Name	Date				
BOX C – COMPANY ENTITY WIT	TH TEN OR MORE EMPLOYEES				
	Name) MEETS the definition of a company as re employees, and is not currently engaged in a nel; companies doing business in or with Israel or a laws of the State of Israel; or persons or entities section 34.600, RSMo. I further certify that if the d/or supplies requested herein said company shall the State of Israel; companies doing business in or zed under the laws of the State of Israel; or persons				
Authorized Representative's Name (Please Print)	Authorized Representative's Signature				
Company Name	Date				