EXHIBIT A – FORMS EXCEPTIONS / ADDITIONAL MATERIAL / ADDENDA

Respondents shall indicate any and all exceptions taken to the provisions or specifications in this solicitation document. Exceptions that surface elsewhere and that do not also appear under this section shall be considered invalid and void and of no contractual significance.

Exceptions (mark	cone):		
**Special Note – Proposal non-res		o the City's Terms and Condition	ns may render a
No excep	otions		
Exception	ns taken (describeattach additiona	al pages if needed)	
Additional Materi	als submitted (mark one):		
No additi	onal materials have been included	with this proposal	
Additiona	al Materials attached (describeatta	ach additional pages if needed)	
A alaa aaala daaaaa aa	ot of addonala increal for this acti	altation.	
	nt of addenda issued for this soli a response to this solicitation, it is	the vendor's responsibility to confirm	n if any addenda
nave been issued.			
	Addenda Number	Initial to acknowledge receipt	
Vendor Name		Date:	
volidoi inailio		Date.	

EXHIBIT A - FORMS VENDOR INFORMATION

Company Legal/Corporate Name:	
Doing Business As (if different than above):	
Address:	
City:	State: Zip:
Phone:	Fax:
E-Mail Address:	Website:
DUNS #	
Remit to Address (if different than above):	Order from Address (if different from above):
Address:	
City:State:Zip:	City:State:Zip:
Contact for Questions about this proposal:	
Name:	Fax:
Phone:	E-Mail Address:
Day-to-Day Project Contact (if awarded):	
Name:	Fax:
Phone:	E-Mail Address:
Certified Small Business	
Certifying Agency:	
Certified Minority, Woman or Disac	advantaged Business Enterprise
Certifying Agency:	

Provide supporting documentation for your certification, if applicable.

EXHIBIT A – FORMS VENDOR CERTIFICATION OF PROPOSAL

By signing and submitting this Proposal, the Vendor certifies that:

- a) It is under no legal prohibition to contract with the City of Clearwater.
- b) It has read, understands, and is in compliance with the specifications, terms and conditions stated herein, as well as its attachments, and any referenced documents.
- c) It has no known, undisclosed conflicts of interest.
- d) The prices offered were independently developed without consultation or collusion with any of the other respondents or potential respondents or any other anti-competitive practices.
- e) No offer of gifts, payments or other consideration were made to any City employee, officer, elected official, or consultant who has or may have had a role in the procurement process for the services and or goods/materials covered by this contract.
- f) It understands the City of Clearwater may copy all parts of this response, including without limitation any documents and/or materials copyrighted by the respondent, for internal use in evaluating respondent's offer, or in response to a public records request under Florida's public records law (F.S. 119) or other applicable law, subpoena, or other judicial process.
- g) Respondent hereby warrants to the City that the respondent and each of its subcontractors ("Subcontractors") will comply with, and are contractually obligated to comply with, all Federal Immigration laws and regulations that relate to their employees.
- h) Respondent certifies that they are not in violation of section 6(j) of the Federal Export Administration Act and not debarred by any Federal or public agency.
- It will provide the materials or services specified in compliance with all Federal, State, and Local Statutes and Rules if awarded by the City.
- j) It is current in all obligations due to the City.
- k) It will accept such terms and conditions in a resulting contract if awarded by the City.
- I) The signatory is an officer or duly authorized agent of the respondent with full power and authority to submit binding offers for the goods or services as specified herein.

ACCEPTED AND AGREED TO:

ompany Name:	
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tle:	
ate:	

EXHIBIT A – FORMS SCRUTINIZED COMPANIES FORMS

SCRUTINIZED COMPANIES AND BUSINESS OPERATIONS WITH CUBA AND SYRIA CERTIFICATION FORM

IF YOUR BID/PROPOSAL IS \$1,000,000 OR MORE, THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID/PROPOSAL. FAILURE TO SUBMIT THIS FORM AS REQUIRED MAY DEEM YOUR SUBMITTAL NONRESPONSIVE.

The affiant, by virtue of the signature below, certifies that:

- 1. The vendor, company, individual, principal, subsidiary, affiliate, or owner is aware of the requirements of section 287.135, Florida Statutes, regarding companies on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or engaging in business operations in Cuba and Syria; and
- 2. The vendor, company, individual, principal, subsidiary, affiliate, or owner is eligible to participate in this solicitation and is not listed on either the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Sector List, or engaged in business operations in Cuba and Syria; and
- 3. Business Operations means, for purposes specifically related to Cuba or Syria, engaging in commerce in any form in Cuba or Syria, including, but not limited to, acquiring, developing, maintaining, owning, selling, possessing, leasing or operating equipment, facilities, personnel, products, services, personal property, real property, military equipment, or any other apparatus of business or commerce; and
- 4. If awarded the Contract (or Agreement), the vendor, company, individual, principal, subsidiary, affiliate, or owner will immediately notify the City of Clearwater in writing, no later than five (5) calendar days after any of its principals are placed on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Sector List, or engaged in business operations in Cuba and Syria.

	Authorized Signature
	Printed Name
	Title
STATE OF	Name of Entity/Corporation
COUNTY OF	
	ged before me by means of \square physical presence or \square online, 20, by (title) of
	ng notarized) as the (title) of(name of corporation/entity), personally known, or
	type of identification) as identification, and who did/did not take
	Notary Public
	Printed Name
My Commission Expires:NOTARY SEAL ABOVE	

EXHIBIT A – FORMS SCRUTINIZED COMPANIES FORMS

SCRUTINIZED COMPANIES THAT BOYCOTT ISRAEL LIST CERTIFICATION FORM THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID/PROPOSAL. FAILURE TO SUBMIT THIS FORM AS REQUIRED MAY DEEM YOUR SUBMITTAL NONRESPONSIVE.

The affiant, by virtue of the signature below, certifies that:

- The vendor, company, individual, principal, subsidiary, affiliate, or owner is aware of the requirements
 of section 287.135, Florida Statutes, regarding companies on the Scrutinized Companies that Boycott
 Israel List, or engaged in a boycott of Israel; and
- 2. The vendor, company, individual, principal, subsidiary, affiliate, or owner is eligible to participate in this solicitation and is not listed on the Scrutinized Companies that Boycott Israel List, or engaged in a boycott of Israel; and
- 3. "Boycott Israel" or "boycott of Israel" means refusing to deal, terminating business activities, or taking other actions to limit commercial relations with Israel, or persons or entities doing business in Israel or in Israeli-controlled territories, in a discriminatory manner. A statement by a company that it is participating in a boycott of Israel, or that it has initiated a boycott in response to a request for a boycott of Israel or in compliance with, or in furtherance of, calls for a boycott of Israel, may be considered as evidence that a company is participating in a boycott of Israel; and
- 4. If awarded the Contract (or Agreement), the vendor, company, individual, principal, subsidiary, affiliate, or owner will immediately notify the City of Clearwater in writing, no later than five (5) calendar days after any of its principals are placed on the Scrutinized Companies that Boycott Israel List, or engaged in a boycott of Israel.

	Authorized Signature
	Printed Name
	Title
	Name of Entity/Corporation
STATE OF	
COUNTY OF	
The foregoing instrument was acknowledge notarization on, this day of	ed before me by means of □ physical presence or □ online . 20 . by
	g notarized) as the (title) o
produced (ty an oath.	(name of corporation/entity), personally known, o /pe of identification) as identification, and who did/did not take
	Notary Public
	Printed Name
My Commission Expires:NOTARY SEAL ABOVE	

EXHIBIT A – FORMS E-VERIFY ELIGIBILITY FORM

VERIFICATION OF EMPLOYMENT ELIGIBILITY FORM

PER FLORIDA STATUTE 448.095, CONTRACTORS AND SUBCONTRACTORS MUST REGISTER WITH AND USE THE E-VERIFY SYSTEM TO VERIFY THE WORK AUTHORIZATION STATUS OF ALL NEWLY HIRED EMPLOYEES.

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE BID/PROPOSAL. FAILURE TO SUBMIT THIS FORM AS REQUIRED MAY DEEM YOUR SUBMITTAL NONRESPONSIVE.

The affiant, by virtue of the signature below, certifies that:

- 1. The Contractor and its Subcontractors are aware of the requirements of Florida Statute 448.095.
- 2. The Contractor and its Subcontractors are registered with and using the E-Verify system to verify the work authorization status of newly hired employees.
- 3. The Contractor will not enter into a contract with any Subcontractor unless each party to the contract registers with and uses the E-Verify system.
- 4. The Subcontractor will provide the Contractor with an affidavit stating that the Subcontractor does not employ, contract with, or subcontract with unauthorized alien.
- 5. The Contractor must maintain a copy of such affidavit.
- 6. The City may terminate this Contract on the good faith belief that the Contractor or its Subcontractors knowingly violated Florida Statutes 448.09(1) or 448.095(2)(c).
- 7. If this Contract is terminated pursuant to Florida Statute 448.095(2)(c), the Contractor may not be awarded a public contract for at least 1 year after the date on which this Contract was terminated.
- 8. The Contractor is liable for any additional cost incurred by the City as a result of the termination of this Contract.

	Authorized Signature
	Printed Name
	Title
	Name of Entity/Corporation
STATE OF	
COUNTY OF	
notarization on, this day of (name	e of person whose signature is being notarized) as the
	name of(name of(type of do not take an oath.
	Notary Public
	Printed Name
My Commission Expires:	