**Attachment A**

CERTIFICATIONS AND ASSURANCES

I/we make the following certifications and assurances as a required element of the proposal to which they are attached, understanding that the truthfulness of the facts affirmed here and the continuing compliance with these requirements are conditions precedent to the award or continuation of the related contract(s):

1. I/we declare that all answers and statements made in the proposal are true and correct.
2. The prices and/or cost data have been determined independently, without consultation, communication, or agreement with others for the purpose of restricting competition. However, I/we may freely join with other persons or organizations for the purpose of presenting a single proposal.
3. The attached proposal is a firm offer for a period of sixty (60) days following receipt, and it may be accepted by the Department without further negotiation (except where obviously required by lack of certainty in key terms) at any time within the sixty (60) day period.
4. In preparing this proposal, I/we have not been assisted by any current or former employee of the state of Washington whose duties relate (or did relate) to this proposal or prospective contract, and who was assisting in other than his or her official, public capacity. (Any exceptions to these assurances are described in full detail on a separate page and attached to this document.)
5. I/we understand that the Department will not reimburse me/us for any costs incurred in the preparation of this proposal. All proposals become the property of the Department, and I/we claim no proprietary right to the ideas, writing, demonstrations, items, or samples, unless so stated in this proposal.
6. Unless otherwise required by law, the prices and/or cost data which have been submitted have not been knowingly disclosed by the Proposer and will not knowingly be disclosed by him/her prior to opening, directly or indirectly to any other Proposer or to any competitor.
7. I/we agree that submission of the attached proposal constitutes acceptance of the solicitation contents and the attached sample contract and general terms and conditions. If there are any exceptions to these terms, I/we have described those exceptions in detail on a page attached to this document.
8. No attempt has been made or will be made by the Proposer to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.

Signature of Proposer

Title Date

**Attachment B**

PROPOSER’S INFORMATION

Please provide the following required information:

1. Name and Address: Name, address, principal place of business, and telephone number of legal entity with whom contract is to be written.

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| City, State, Zip: |  |
| Telephone Number: | ( ) |
| Web Page: |  |

1. Location Address (if different)

|  |  |
| --- | --- |
| Address: |  |
| City, State, Zip: |  |

1. Principal Officers: Name, address and business telephone number of the principal officers (e.g.: President, Vice President, Board Chairperson) of the organization.

|  |  |
| --- | --- |
| Name/Title: |  |
| Name/Title: |  |
| Name/Title: |  |
| Name/Title: |  |

1. Organization and Year: Legal status and business structure (corporation, partnership, sole proprietorship, etc.) of the Proposer and the year entity was established.

|  |  |
| --- | --- |
| Status: |  |

1. Employer Identification

|  |  |
| --- | --- |
| Federal I.D.: |  |
| UBI (Revenue Registration Number): |  |
| Firm’s Minority Business Enterprise Certification Number (If applicable): |  |

1. RFP Contact: Name, title, address, e-mail, telephone and fax numbers for Proposer’s RFP Contact.

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| City, State, Zip: |  |
| Telephone Number: | ( ) |
| Fax Number: | ( ) |
| E-Mail: |  |

**Attachment** C COST SCHEDULE

Provide a **Five-Year Total Cost Summary** for each of your proposed solutions (e.g., KMS SAAS, KMS On-Premise, CRM SASS, CRM On-Premise, KMS/CRM SAAS, KMS/CRM On-Premise).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Five-Year Total Cost Summary**  **Solution (KMS/CRM/KMS&CRM): Deployment Model (On-Premise/SAAS):** | | | | | | |
| **Costs** | **Total** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
| Hardware |  |  |  |  |  |  |
| Software Licensing |  |  |  |  |  |  |
| Third-Party Software |  |  |  |  |  |  |
| Installation |  |  |  |  |  |  |
| Installation Consultation, if any |  |  |  |  |  |  |
| Integration |  |  |  |  |  |  |
| Legacy Data Loading |  |  |  |  |  |  |
| Maintenance |  |  |  |  |  |  |
| Documentation & Training |  |  |  |  |  |  |
| Project Management |  |  |  |  |  |  |
| Other (specify) |  |  |  |  |  |  |
| **Total:** |  |  |  |  |  |  |

Hardware Includes:

Software Licensing Includes:

Third-Party Software Includes:

Installation Includes:

Installation Consultation Includes:

Integration Includes:

Legacy Data Loading Includes:

Maintenance Includes:

Documentation & Training Includes:

Project Management Includes:

Other Includes:

DEFINITION OF ALL-INCLUSIVE FEE:

The fee shall include all administrative expenses, travel, and cost of doing business, telephone conferences, and federal, state, and local taxes. Proposer is expected to be on-site and travel to the Department of Retirement System’s place of business in Tumwater for meetings, consultation and training. The Proposer is responsible for calculating the additional time required for any revisions and corrections as part of the inclusive fee. No additional charges will be paid.

Signature of Proposer

Title Date