

## Attachment 2

### CONSULTANT INFORMATION AND CERTIFICATIONS

(Please submit this with your Part II: Cost Proposal)

CONTRACT NUMBER: C030789

PROJECT TITLE: ATMS RFP

---

#### I. CONSULTANT INFORMATION

FIRM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE:    \_ \_ \_ \_ \_ - \_ \_ \_ \_ \_

TELEPHONE : (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_      FAX: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

Consultant's Federal Identification Number (FIN): \_\_\_\_\_

Consultant's NYSDOT Consultant Identification Number (CIN): \_\_\_\_\_

Consultant's New York State SFS Vendor Identification Number: \_\_\_\_\_

- Please indicate below the name, title, address, and telephone/fax numbers of the person who prepared this proposal, as well as any other individual(s) with authority to negotiate and contractually bind the offerer and also who may be contacted during the period of proposal evaluation:

Preparer's Name/Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone:    (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_      FAX: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Other Authorized Individual(s):

Name/Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone:    (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_      FAX: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

## II. PROPOSER CERTIFICATIONS

By signing below, I, \_\_\_\_\_, authorized individual  
(Name)

of \_\_\_\_\_ make the following  
(Firm)

**certifications regarding the subject proposal:**

- 365-Day Offer: This proposal is a firm offer for a 365-day (or more) period from the date of submission.
- The firm has read and will follow the procedure outlined in **Attachment 5** if it proposes the services of a former NYSDOT employee(s).
- Vendor Responsibility: If selected for contract award, the firm will complete and submit the required Vendor Responsibility forms to NYSDOT within 10 days of notification of designation both electronically and in hard copy per the NYSDOT Web site.  
(<https://www.dot.ny.gov/main/business-center/consultants/forms-publications-and-instructions>)
- ST-220: If selected for contract award, the firm will complete and must submit the required Forms ST-220-TD and 220-CA (Contractor Certifications) prior to negotiation with NYSDOT. You should make yourself familiar with these forms by visiting the following Web sites:  
([http://www.tax.ny.gov/pdf/current\\_forms/st/st220ca\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf)) (Form ST-220-CA)  
([http://www.tax.ny.gov/pdf/current\\_forms/st/st220td\\_fill\\_in.pdf](http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf)) (Form ST-220-TD)
- The firm is in compliance with the requirements of the Omnibus Procurement Act which is found in the Draft Contract attached to this RFP.

**Signature:** \_\_\_\_\_

## III. ACCEPTANCE OF CONTRACT

By signing below, I, \_\_\_\_\_, authorized individual  
(Name)

of \_\_\_\_\_ hereby **certify that I have read and**  
(Firm)

**accept** all terms and conditions contained in the draft Contract, including

Appendix A, which is included as **Attachment 1** to this Request for Proposals.

**Signature:** \_\_\_\_\_