



# County of Allegheny

Department of Human Services

## Request for Qualifications

### To Build Business Intelligence and Small Scale Applications in Human Services

Activity	Target Date
County Issues RFQ	2/26/2014
Questions in advance by email	Ongoing until seven days prior to proposal due date
Publish Q & A <a href="http://www.alleghenycounty.us/dhs/RFQ.aspx">http://www.alleghenycounty.us/dhs/RFQ.aspx</a>	Ongoing until seven days prior to proposal due date
Proposal Due	4/18/2014
RFQ Evaluation Period	5/1/2014- 6/2/2014
Recommendation of Provider (s)	6/15/2014
Contract Begin Date	9/1/2014

**This Request for Qualifications contains requirements for Proposers to assist the County in meeting its M/W/DBE goals. Therefore, Proposers must document their plan or good faith efforts to meet those goals. The M/W/DBE Participation Statement is required with proposal submission. See Appendix A of this RFQ.**

# Allegheny County Department of Human Services

## Request for Qualifications

### To Build Business Intelligence and Small Scale Applications In Human Services

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## **A. General Instructions and Information**

### **About this Document**

This document is a Request for Qualifications (RFQ). It differs from an invitation to bid in that the County is not seeking a quotation meeting firm specifications for the lowest price. Rather, the County is requesting the submission of proposals emphasizing the capacity to develop business intelligence and small scale applications in human services. The proposal selection process should be viewed as a standard that measures how well a proposal meets the desired requirements and needs of the County. The criteria that the County will use in evaluating the proposals, pre-qualifying applicants, and potentially, making an award of a contract(s) is set forth herein the RFQ Selection Process. The County reserves the right to qualify, and subsequently recommend for an award, the proposal or proposals which best meet its required needs, quality levels and other constraints.

**The issuance of the RFQ does not obligate the County to enter into a contract for any services. The County reserves the right to reject any and all proposals submitted.**

### **Examination of Documents and Requirements**

Proposer shall carefully examine all RFQ documents and thoroughly familiarize themselves with all requirements prior to submitting a proposal to ensure that the proposal meets the intent of this RFQ. Before submitting a proposal, each proposer shall be responsible for making all investigations and examinations that are necessary to ascertain conditions and requirements effecting the requirements of this RFQ. Failure to make such investigations and examinations shall not relieve the provider from an obligation to comply, in every detail, with all provisions and requirements of the RFQ.

### **Minority, Women or Disadvantaged Business Enterprise (M/W/DBE) Requirements**

M/W/DBEs shall receive equal opportunities to submit proposals and shall not be discriminated against on the grounds of race, color, sex, disability, or national origin in consideration of an award. A MWDBE is defined as a small business concern which is at least 51% owned and controlled by one or more socially and economically disadvantaged individuals, or in the case of any publicly owned business, at least 51% of the stock of which is owned by one or more socially and economically disadvantaged individuals. Socially and economically disadvantaged include Women, Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, and Asian-Indian Americans. A listing of MWDBEs certified by the County and the Pennsylvania Unified Certification Program can be found at

[www.county.allegheny.pa.us/mwdbe](http://www.county.allegheny.pa.us/mwdbe)

**This Request for Qualifications contains requirements for Proposers to assist the County in meeting its M/W/DBE goals. Therefore, Proposers must document their plan or good faith efforts to meet those goals. The M/W/DBE Participation Statement is required with proposal submission. See Resources page 25.**

## **Proposal Preparation Costs**

Issuance of this RFQ does not commit the County, in any way, to pay any costs incurred in the preparation and submission of a proposal. All costs related to the preparation and submission of a proposal shall be paid by the proposer.

## **B. Introduction**

The Allegheny County Department of Human Services (DHS) seeks qualified applicants who may be selected to build custom business intelligence and programmatic applications to improve the delivery of services to DHS consumers as well as to provide occasional broader IT consultation as described below. Once consultants are pre-qualified, they will be asked to complete a “new provider application” and a contract with DHS (contracts are renewed every fiscal year). Once this contract process is complete, the consultant will be eligible to be considered for new application/tool development on an as-needed basis. It is important to understand that DHS is under no obligation to select a consultant for any specific project simply because a contract is in place; a contract is no guarantee of work or of a specific amount of hours. DHS expects to support up to 10 small projects per year at an average development cost of \$50,000 per project<sup>1</sup>.

### **Eligibility**

All entities are eligible for this solicitation, including government organizations, education organizations, non-profit organizations, for-profit organizations, small businesses and individuals<sup>2</sup>.

Organizations do not need to have an existing contract with Allegheny County but must meet all of Allegheny County’s contractual requirements available at:

<http://www.alleghenycounty.us/dhs/contracting.aspx>

and have the programmatic, financial and staffing capability to conduct this activity.

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<sup>1</sup> Projects will be awarded based upon programmatic need and availability of funds; issuance of this RFQ does not obligate DHS to award a specific number of contracts and/or projects.

<sup>2</sup> For more information about eligibility, please see: <http://www.grants.gov/web/grants/applicants/grant-eligibility.html;jsessionid=LbfrS11LkPRNxIzIVyfWTTvHpvjr1vdGCFW87LnMsTCPNpBCWX2N>

## **C. Background**

### **About the Allegheny County Department of Human Services**

The Allegheny County Department of Human Services (DHS) was created in 1997 to consolidate the provision of human services across Allegheny County. In addition to the Executive Office, DHS consists of five program and three support offices that together serve approximately 20 percent of Allegheny County's residents.

DHS is responsible for providing and administering publicly-funded human services to Allegheny County residents. DHS is dedicated to meeting these human service needs, most particularly for the county's vulnerable populations, through an extensive range of information exchange, prevention, early intervention, case management, crisis intervention and after-care services.

DHS provides a wide range of services, including services for older adults; mental health and drug and alcohol services (includes 24-hour crisis counseling); child protective services; at-risk child development and education; hunger services; emergency shelters and housing for the homeless; non-emergency medical transportation; job training and placement for public assistance recipients and older adults; and services for individuals with intellectual and/or developmental disabilities.

The Allegheny County Department of Human Services provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.

### **About the DHS Information Technology Infrastructure and Vision**

Technology is a vital part of what assists DHS to do its work efficiently and effectively. As an organization with a budget of more than \$800 million, more than 1,000 staff, and over 300 contracted partner agencies, our information systems are essential to basic operations. Systems have also become critical as we work to improve client systems of care. DHS was an early leader in linking data sets and data systems to inform practice, policy and planning. Today's systems, if designed, implemented and used correctly, collect information that is critical for client service and allow it to be shared real time across the entire service system. What's more, the data collected through these systems can drive higher-level decision making based on facts on the ground, and push our system constantly toward improvement. An example is DHS's new child welfare case management system, which evolved from a mainframe billing system to a fully-paperless case management system over the past five years.

DHS's data infrastructure, the Data Warehouse, consists of a central repository of social services data from 19 sources (10 internal and nine external) representing 29 different human service program areas. The Data Warehouse contains more than 640 million records for about 1,000,000 distinct clients. It allows DHS to track and report client demographic and service data across its program offices and beyond. The Data Warehouse includes data on aging services, child welfare services, mental health services, drug and alcohol services, intellectual disability services, homeless and housing supports, family support centers, juvenile justice involvement, jail involvement, assisted housing (public housing and Section 8), public benefits, and enrollment and outcome information from the largest local public school systems.

More information on these systems is available upon request.

## **Possible Opportunities to Build Custom Business Intelligence and Programmatic Applications**

The types of projects DHS expects to support include:

### **I. Automated Analytic Tools**

- **Automated Outcome Analysis:** Continuous analysis is required for a number of program outcomes. For example, recidivism outcomes for clients involved in a specific criminal justice program may be measured by:
  - Return to jail
  - Probation violation
  - New criminal case filed
  - New conviction

These data are collected in three different data systems, maintained by different entities, including the Allegheny County Jail, Fifth Judicial District, and Adult Probation (a subset of the Fifth Judicial District). Because all of these data come together in the DHS Data Warehouse; the opportunity exists to build an automated tool that would allow analysts from DHS (and other government partners) to quickly run a list of clients through the tool and obtain recidivism outcomes.

Similar tools are required to examine returns to child welfare services, homeless shelter services, inpatient mental health, and drug and alcohol services and hospitalizations. In addition to returns to care, some prevention programs may strive for outcomes that can only be measured with data from another service area, such as preventing entry into the jail, or successfully establishing a mental health service connection. Each requires different data and rules, but what is common to all is the need for automated tools to quickly analyze multiple data from a number of sources.

- **Automated Reporting:** DHS has access to large volumes of consumer and service data; the need exists to make these data more relevant to daily operations and organizational management at all levels so that they become an integral facet of front-line service provision and programmatic decision-making. This capability exists in DHS' child welfare office; we are interested in similar approaches for other offices (e.g., behavioral health, homelessness, and intellectual disabilities).

**II. Identifying High-End Users:** Another example of an automated business intelligence tool is building an application with the ability to look across the entire DHS service system and data warehouse to identify the most expensive consumers and/or those most likely to continuously rotate through our system. The results of this analysis would be used to tailor more effective services to these consumers.

### III. Applications For New Programs/Interventions

We live in an age where public dollars need to be well accounted for in electronic systems. However, as we are also in an environment of rapid and continuous innovation and improvement, the challenge is to build easy to use, custom electronic applications that can adapt to the changing program design while gathering key data. Because program change is expected to continue for at least the next several years, it is too early - and too time consuming - to build long-term heavy applications. Instead, DHS requires quick-turnaround, flexible applications to meet program needs even while they are still being designed. In some ways, these sorts of data collection needs were previously met by Excel or Access applications, but today's program needs require easier-to-use and more flexible applications as well as tools that can be accessed by multiple users over the Internet. There are many examples of this type of development; the following examples are illustrative:

**Example 1:** DHS developed an application to support the Focus on Attendance program, designed with reporting capability and to track clients served, client information relevant to the program, needs identified and referrals made. Given the time required to develop the application, staff had to back enter data for multiple months; in addition, program requirements – and thus IT requirements - changed continuously during early months of the program, making some aspects of the IT application unsuitable. Now, just two years into the program, DHS is considering discontinuing the project. This sort of evolution is not unique. A better solution would have been a quick turnaround, agile application of considerably less cost that could be more formally integrated into the broader IT infrastructure as it matured.

**Example 2:** Today, DHS has stored five years of child welfare case review and critical incident review in a series of spreadsheets and databases. A simple application could better support the various uses of these data, while improving ease of use and speed of analysis and reporting.

**Example 3:** Since 1996, the Director's Action Line (DAL) has been providing a personal response to individuals with questions, concerns, complaints and a multitude of issues; the DAL has an application that has not been updated since 1999. An upgraded system would provide options for interfacing with other applications and allow for more effective monitoring and follow-up.

Ideally, we would have IT platforms flexible enough to accommodate multiple programs/initiatives.

### IV. IT Consultation

DHS may request feedback/comment on proposed designs of applications or infrastructure already developed. The purpose of this type of consultation will be to build the best infrastructure possible. For example, DHS may request comment on Data Warehouse design and structure or requirements/design for a specific application. Likewise, we might request user experience consultation. We may request this type of consultation from one or all of the applicants qualified under this RFQ. This type of consultation is expected to be much more time limited (turnaround within a month) and of lower cost to the county.

***All tools and applications will be built in the public domain. DHS will share the results with other organizations and jurisdictions seeking to address similar issues.***

## **D. Proposal Instructions and Evaluation Criteria**

Proposals are limited to a total of 20 narrative pages, plus executive summary and attachments. No additional attachments, other than those specified, will be accepted. Please submit only proposals with 1-inch margins, 12 point font and numbered pages. Single spacing is permissible. Proposals will be rated on a 100 point scale. Please organize your application so that it addresses each of the following areas:

1. Executive Summary [in Microsoft Word and PDF]
2. Narrative [In Microsoft Word and PDF]
3. Attachments

### **1. Executive Summary:**

The Executive Summary should not exceed one page and should include:

- Applicant information, including key staff
- A description of the type of issue(s) the applicant can address
- A brief description of organizational capacity to address the identified issue(s), including examples of activities similar to those identified
- Funding expectations; e.g., time and materials

### **2. Narrative (80 points)**

#### ***Organization(s) description/qualifications***

- Address how your organization is qualified to design and build custom business intelligence and programmatic applications and/or provide periodic broader IT consultation.
- Describe your organization's experience in working with human services practitioners (including government analysts, clinicians, social workers, leaders).
- Describe your approach to application development
- Provide examples of successful, relevant projects (specifications can be included in appendix, does not count against the 20-page limit)
- Explain your project management approach
- Describe quality assurance and user acceptance procedures
- Describe how your applications have been integrated with larger Information Technology infrastructure
- Explain how break/fix and application maintenance may be managed
- Identify key staff:
  - List staff, their roles and each of their qualifications.
  - Attach copies of the résumés of staff that will be providing services. (include in appendix, does not count against the 20-page limit)



### **3. References (20 points)**

- 1) Include name, affiliation and contact information for three references.
- 2) References should be able to address experience with your organization that is relevant to the proposed project.

## **E. Technical Proposal Requirements**

### **Issuing Office**

The County's Department of Human Services (DHS) is serving as the "Issuing Office" for this RFQ. The Issuing Office is the sole point of contact in the County with regard to all aspects of this RFQ. Please refer all inquiries about the RFQ in writing and emailed to:

[DHS-RFQ\\_BusinessIntelligence@alleghenycounty.us](mailto:DHS-RFQ_BusinessIntelligence@alleghenycounty.us)

All requests for additional information or clarification concerning this RFQ must be submitted in writing no later than seven (7) day prior to the proposal due date, and emailed to:

[DHS-RFQ\\_BusinessIntelligence@alleghenycounty.us](mailto:DHS-RFQ_BusinessIntelligence@alleghenycounty.us)

### **Addendum and Modifications**

Any changes, additions, deletions, or clarifications to the RFQ are made by written document called an addendum. Any Proposer in doubt as to any part of the RFQ may request an interpretation or clarification from the Issuing Office. At the request of the Proposer, or in the event the Issuing Office deems the interpretation to be substantive, the interpretation shall be made by addendum issued by the Issuing Office. Such addendum issued by the Issuing Office shall become part of the proposal package having the same binding effect as provisions of the original RFQ. No verbal explanations or interpretations shall be binding. In order to have a request for interpretation considered, the request must be submitted in writing and must be received by the Issuing Office no later than seven (7) days prior to the proposal due date. Addendums shall be posted to the following website

<http://www.alleghenycounty.us/dhs/RFQ.aspx>

### **Submission**

Proposals should be submitted electronically in Word/Excel and PDF. To be considered, the proposal must respond to all requirements in the RFQ. The contents of this RFQ and your proposal shall become part of any contract(s).

In addition to the electronic copy, proposers may submit hard copy submissions via US mail to the address below, postmarked on or before the RFQ due date April 18, 2014. All submissions must be clearly identified as "Business Intelligence and Small Scale Applications in Human Services."

## **Electronic**

[DHS-RFQ\\_BusinessIntelligence@alleghenycounty.us](mailto:BusinessIntelligence@alleghenycounty.us)

### **US Mail:**

Allegheny County Department of Human Services  
Attn: Leslie Lewis-Pollard  
One Smithfield St. 5th Floor  
Pittsburgh, PA 15222.

The County, through the Issuing Office, may make such investigation as it sees fit to determine the ability of the Proposer to perform the work, and the Proposer shall furnish the County all such information and data for this purpose as requested by the County. The County reserves the right to reject any proposal if the evidence submitted by, or investigation of, such Proposer fails to satisfy the County that such Proposer is properly qualified to carry out the obligations of the contract and to satisfactorily perform the work specified.

### **Final Award Process**

After discussions and negotiations, the Evaluation Committee will tabulate and submit recommendations to the Director of DHS and the County's Purchasing Division. Any award resulting from this qualification process must be approved by the County Manager.

### **F. Selection Process**

The County will use a formal evaluation process to select qualified respondent(s). The County will consider capabilities or advantages that are clearly described in the proposal. The County reserves the right to contact individuals, entities, or organizations that have had dealings with the respondent or proposed staff, whether or not identified in the proposal. Evaluation will be carried out in the following manner:

The County will designate an appropriate committee for the review and evaluation of all proposals submitted in response to this RFQ. The team representatives may be:

- In the employ of the County
- Recruited from local funding partners
- Recruited from local educational institutions for subject matter expertise
- Others as determined by the County.

The County's evaluation committee will establish an appropriate evaluation method, such as a matrix, to analyze the proposer's qualifications. The County may, at its discretion, request additional information or clarification from proposers and/or conduct interviews with proposers as deemed necessary.

## **Oral Presentations and Site Visits**

The County may request oral presentations, site visits, and/or demonstrations from one or more respondents. The County will notify selected respondents of the time and location for these activities, and may supply agendas or topics for discussion. The County reserves the right to ask additional questions during oral presentations, site visits, and or demonstrations to clarify the scope and content of the written proposal. The respondent's oral presentation, site visit, and/or demonstration must substantially represent material included in the written proposal, and should not introduce new concepts or offers unless specifically requested by the County.

### **1. Individual Project Selection Process**

Any pre-qualified consultant who engages in a current contract with DHS will be eligible for selection for each specific application/tool development. Consultant selection is dependent upon a number of variables, including:

- Content knowledge
- Technical ability
- Skills specific to the project
- Ability to integrate with current architecture
- Ability to assist DHS in developing a plan to maintain application once developed
- Demonstrated ability to deliver within estimated cost and materials
- Availability
- Previous performance

DHS may use multiple methods to select a consultant for a given project, including requesting a project specific proposal, meeting with key project leaders, and/or review of similar projects completed. The RFQ process will be conducted every three years, at which time all current and any interested bidders may submit qualifications for consideration.

### **2. Payment**

In most cases, when a specific project is awarded, DHS expects to pay based on time and materials. In these cases, consultants will be expected to bill actual costs to DHS on a monthly basis.

## **G. Contract Terms**

This Request for Qualifications (RFQ) provides interested, qualified applicants with information to submit proposals for consideration by DHS for pre-qualification to build business intelligence and small scale applications in Human Services through a subsequent contract agreement with DHS.

It is the intent of DHS to pre-qualify a sufficient number of providers to assure the provision of adequate services throughout the term of the agreement as determined by DHS's sole discretion.

## **1. Contract Type**

This RFQ will employ a reasonable selection process to identify the most advantageous and appropriate individuals and/or entities to meet DHS's needs in terms of service quality, provider experience and other evaluative factors.

Under no circumstances should this RFQ be construed as a commitment by the DHS to award a contract to any applicant(s). Funding of specific contracts is contingent upon availability of sufficient funds. Since pre-qualification may be awarded on a received proposal without further negotiations or revisions, proposals should present the most favorable terms from a service delivery standpoint. Incomplete or incorrectly completed proposals may be rejected outright.

## **2. Contract Period**

If a qualified respondent is subsequently awarded a contract, the term of the contract will be 12 months. The contract may, at the sole discretion of DHS, be renewed annually. The selected applicants will be responsible for and begin to provide services beginning on September 1, 2014. DHS must be notified of potential or actual ownership changes and/or relocation during negotiations or the contract year at least two (2) weeks prior to any such changes. DHS may adjust the amount or rate of reimbursement during the contract term at its discretion, based on availability of funds, provider performance, utilization reviews, associated costs and priorities of the overall program.

## **3. HIPAA Compliance**

DHS is a covered entity with regard to the Health Information Portability and Accountability Act (HIPAA). The selected provider must be prepared to comply with any applicable HIPAA requirements and appoint a HIPAA Compliance Officer.

## **4. Contract Terms and Conditions**

The standard DHS contract, including all insurance requirements can be found on the DHS website at <http://www.alleghenycounty.us/dhs/contracting.aspx>. The selected applicant must at the time of contract execution provide an insurance ACORD certificate meeting all of the minimum insurance requirements stated in Exhibit C of the Contract. Costs associated with the purchase of such insurance are the sole responsibility of the provider.

## **5. CYBER Security**

A significant portion of the DHS business activities and related billing carried out under this RFQ are done through information management systems or tools, including email. Proposers should meet the minimum computer specifications in the DHS Contract Specifications Manual available on the DHS website and should make sure their computers, laptops, and other electronic devices have sufficient security software and settings to minimize the risk of a breach of information. In addition the proposer should have policies and procedures in place to assure their electronic devices are physically secure when not in use (i.e. locked in a vehicle trunk, password protected, etc.).

## **6. Conflict of Interest**

The proposer shall not accept gifts or anything of value nor enter into any business arrangement with any employee, official or agent of the County. By signing their proposal, the proposer certifies and represents to the County that the proposer has not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient's decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFQ.

## **7. Equal Employment Opportunity/Non-Discrimination**

Proposer shall not discriminate against any employee, applicant for employment, independent contractor, consumer or any other person on the basis of race; color; religion; national origin or ancestry; sex; gender identity or expression; sexual orientation; disability; marital status; familial status; age (40 or over); or use of a guide or support animal because of blindness, deafness or physical disability of any individual or independent contractor or because of the disability of an individual with whom the person is known to have an association; or on any other basis prohibited by federal, state or local law. For more information please refer to the Resources on page 25.

## **8. Contract Specification**

The successful proposer(s) will enter into a contract with the Allegheny County Department of Human Services for performance of the work as specified in this Request for Qualifications and as may be further defined in the proposer's qualifications. Contracting with DHS (terms and conditions) can be found on the DHS website at: <http://www.alleghenycounty.us/dhs/contracting.aspx>

## **APPENDICES**

APPENDIX A  
PROPOSAL AUTHENTICATION FORM

**TITLE:** Business Intelligence and Small Scale Applications In Human Services

**DUE DATE:** APRIL 28, 2014

The undersigned hereby offers to furnish and deliver the services as specified in strict accordance with the RFQ and scope of proposal, all of which are made a part of this request. This offer is not subject to withdrawal without permission of the County of Allegheny Department of Human Services Director.

**FULL LEGAL COMPANY NAME:** \_\_\_\_\_

**DOING BUSINESS AS:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY, STATE AND ZIP CODE:** \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**TITLE OF AUTHORIZED SIGNER:** \_\_\_\_\_

**TELEPHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

**WEBSITE URL:** \_\_\_\_\_

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

**COMPANY INFORMATION**

(This information is for tracking purposes only and has no role in the determination of the responsible proposer.)

Check here if your firm is registered with the Allegheny County Department of Minority, Women and Disadvantaged Business Enterprises

Check here if your firm is a "Minority Business Enterprise" or "MBE" as defined in the Small Business Act, 15 USC

Check here if your firm is a "Women Business Enterprise" or "WBE" as defined in the Small Business Act, 15 USC

Check here if your firm is a "Small Business" as defined by the Small Business Administration (13 C.F.R. 121.201, in most cases, this means a business with 500 or fewer employees)

**NOTE: THIS PAGE MUST BE SUBMITTED WITH YOUR PROPOSAL. ALL PAGES REQUIRES A LIVE SIGNATURE SIGNED IN BLUE INK.**

APPENDIX B  
 ABBREVIATED APPLICATION

1. Primary Contacts

	Chief Executive	Chief Information Officer	Chief Financial Officer	Contract Processing Contact
Name				
Email				
Phone				

Note: If you are an individual applying, you may identify yourself for all of the above roles.

2. I/we certify that this I/we/this organization is not currently under suspension or debarment by the Commonwealth of Pennsylvania, any other state, county or the federal government.

So certified

3. Have you ever obtained or been denied a performance or fidelity bond, or has your bond ever been revoked?

Yes  No

If yes, explain:

4. Has an application to be an Allegheny County provider/vendor been denied in the past?

Yes  No

If yes, explain:

5. Have you ever filed for bankruptcy?

Yes  No

If yes, explain:



6. Have you paid all taxes for the past years, including but not limited to real estate tax, employer taxes, employee withheld taxes, personal income tax (if individual)?

Yes  No

If yes, explain:

7. Do you have the capability to do electronic billing if required?

Yes  No

If yes, explain:

8. Do you currently carry the insurance (see contract on DHS website) required to enter into a contract with DHS?

Yes  No

If yes, explain:

9. Do you/your staff have valid Pennsylvania driver licenses?

Yes  No

If yes, explain:

As an authorized signatory for \_\_\_\_\_ I hereby certify to the best of my knowledge and belief that the information in this proposal and application is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print/Type Name: \_\_\_\_\_ Title: \_\_\_\_\_

APPENDIX C INTERNAL REVENUE SERVICE W-9  
 A fill-in version of this form can be obtained at the IRS website.

Form <b>W-9</b> (Rev. October 2007) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer                  Identification Number and Certification</b>	Give form to the requester. Do not send to the IRS.
Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number : : : : : :	or
Employer identification number : : : : : :	

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

For an LLC classified as a partnership or a corporation, enter the LLC's name on the "Name" line and any business, trade, or DBA name on the "Business name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

### Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
  2. The United States or any of its agencies or instrumentalities,
  3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
  4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
  5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
  7. A foreign central bank of issue,
  8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
  9. A futures commission merchant registered with the Commodity Futures Trading Commission,
  10. A real estate investment trust,
  11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
  12. A common trust fund operated by a bank under section 584(a),
  13. A financial institution,
  14. A middleman known in the investment community as a nominee or custodian, or
  15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup>See Form 1099-MISC, Miscellaneous Income, and its instructions.  
<sup>2</sup>However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.



**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

#### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>3</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup>List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup>Circle the minor's name and furnish the minor's SSN.

<sup>3</sup>You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup>List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN.
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

#### Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft) or 1-877-IDTHEFT(438-4338).

Visit the IRS website at [www.irs.gov](http://www.irs.gov) to learn more about identity theft and how to reduce your risk.

#### Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

# Allegheny County

Vendor Creation Form

Controller's use only:

Supplier No. \_\_\_\_\_

1099 Eligibility:  Yes  No

Add  Change Supplier No. \_\_\_\_\_

Company Information:

Federal Tax ID (TIN)

**Company Name** (Please type or print)

**Original W-9 must be attached**

**Required information**

**Type of Service Provided**

- Independent Contractor
- Maintenance/Service Agreement
- Insurance
- Personal Reimbursement
- Other (please list)
- Rent
- Care Giver
- Legal
- Medical

**Type of Commodity Provided**

(please describe below)

**Required Information**

**Minority Or Women Owned**

Yes  No

If yes select ethnicity and gender of the vendor below:

- Asian Pacific American
- Black American
- Hispanic American
- Native American
- Subcontinent Asian American
- Non-Minority Woman
- Other

If Yes  Male  Female

Certified By:  PAUCP  PADGS  Non PA Certification

(attach copy of certification)

**Non-Profits including Faith Based Organizations**

- Faith Based Non-Minority
- Faith Based Minority
- African American Non-Profit
- Other Non-Profit

**Outreach Manager Interface**  Yes  No

APPENDIX D

**Industry Classification by NAICS Code**

Primary Industry \_\_\_\_\_

Secondary Industry (if applicable) \_\_\_\_\_

\*If code is not known go to <http://www.census.gov/epcd/naics02/naicod02.htm> and select the correct code.

**Supplier Information (Search Type "P")** – (Where PO should be sent to place order)

Please type or print

~~Company Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address Line 1 \_\_\_\_\_ Fax Number \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Address Line 3 \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
ZIP Code \_\_\_\_\_~~

**Required Information**

**Supplier/Remit To Information (Search Type "V")** – (Where check will be mailed for payment. Check must be made payable to exact name listed under TIN provided or check cannot be processed.)

**Please print or type**

Supplier/Payee Name \_\_\_\_\_  
Address Line 1 \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Address Line 3 \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
ZIP Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Fax Number \_\_\_\_\_

\*If the "remit to" information provided on form does not match invoices submitted for payment, the Controller's Office MUST contact supplier to verify address information before payments are processed. Thank you for your cooperation.

If the Allegheny County Department with which you do business is known, providing the information below will help in the processing of your payments. Failure to include the information may result in processing delays.

---

**Allegheny County**

**Departmental Contact**

Name            Leslie Lewis-Pollard  
\_\_\_\_\_  
Telephone  
No.            412-350-5663  
\_\_\_\_\_  
Fax No.        412-350-3414  
\_\_\_\_\_  
Email  
Address:      L Lewis-  
                  pollard@alleghenycounty.us  
\_\_\_\_\_

**Supplier/Payee Contact Name**

Name            \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.    \_\_\_\_\_  
\_\_\_\_\_  
Fax No.        \_\_\_\_\_  
\_\_\_\_\_  
Email Address:    \_\_\_\_\_  
\_\_\_\_\_

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## M/W/DBE Utilization Affirmative Action Requirements for Proposers



MWDBE Utilization  
Affirmative Action Req

## Equal Employment Opportunity (EEO)



Equal Employment  
Opportunity (EEO).pdf

## M/W/DBE Participation Form – REQUIRED WITH PROPOSAL SUBMISSION



M-W-DBE  
Participation Statemer