

Form C: Vendor Profile/Qualifications

RFP#: 23-EMS37

This form must be returned with your response.

Zip

State

COMPANY INFORMATION

Telephone Number

Email

Address

Company Name (Make sure to use your complete, legal company name.)					
FEIN (If FEIN is not applicable, SSN o	collected upon awa	ard.)			
Contact Name (Able to answer questions about proposal.)		sal.)	Title		
Telephone Number		Fax Number			
Email					
Address	City			State	Zip
ORDERS/BILLING CONTACT					
Address where City purchase orders, contacts concerning orders and billing		e mail	ed and per	son the de	partment
Contact	Title	2			

City

Fax Number

LOCAL VENDOR STATUS

The City of Sun Prairie has included a local vendor preference granting a scoring preference to
local suppliers. Only suppliers within the City of Sun Prairie limits as of the bid's due date will
receive preference.

CHECK ONLY ONE:	
Yes, we are a local vendor.	
☐ No , we are not a local vendor.	
CORPORATION INFORMATION	
If applicant is a corporation, please complete both	columns:
Names of Corporate Officers	Names of Corporate Directors

LICENSES AND PROFESSIONAL REGISTRATION

List names of each key person of the firm. If a requested service requires a licensed/registered practitioner, you will be required to provide a copy of such license/registration before work can begin.

		Current	
	Capacity	Licenses/Registrations	License/Registration
Name	(Owner, Partner, Etc.)	(Include Certificate # if	Expiration Date
		applicable)	

CONFLICT OF INTEREST		-	
connection to your busing compromise the compet conflict of interest with the state of the specify the	ness, and a third party ma itive process. Does any e this process? Yes following:	ee or close relative/family in ay consider that this relation mployee of your company No Employee Phone Number	onship may v have a possible
Employee's Relationship	:		
PRIOR WORK			
Has your organization ev If yes, please specify sco		ne City of Sun Prairie?	Yes No

WORK EXPERIENCE

List contracts for similar services or materials that have been completed within the last five years.

Project	Location	Type of Service	Total	Completion	Name/Phone of
			Amount of	Date	Owner or Other
			Contract		References

KEY PROJECT PERSONNEL INFORMATION

Provide the requested information for key personnel who would be assigned to work on contracts awarded or who would, at a minimum, supervise such work.

Name and Title	Primary	Years of	Education	Other Relevant
	Responsibilities	Experience	(Degrees,	Experience and/or
			Certificates)	Qualifications

JUDGEMENTS AND CLAIMS

Are there any judgements, claims or suits pending our outstanding against you or your
organization? Yes No
If yes, please explain:
DISPUTES REGARDING LIENS
Has any owner or higher-tier contractor with whom you r business has had a contract ever
disputed a claim of lien filed by you or your organization? Yes No
If yes, please explain:
RECEIVERSHIP
NECETY ENSITIE
Have you or your organization filed for bankruptcy, receivership, or reorganization within the
last five years?
Yes No
If yes, please explain:
n yes, piedse explain.
LECAL INEDACTIONS
LEGAL INFRACTIONS
Have you or your organization been cited and/or fined for failure to comply with federal or
state regulations and/or statues in the past two years? Yes No
If yes, please explain:

SONDING- Only if needed
Attach a letter from your surety company or its agent licensed to do business in Wisconsin erifying your organization's capacity to provide adequate performance and payment bonds.
lave any funds been expanded by a surety company on your behalf? Yes No
f yes, please explain:
ist all of the surety companies that have provided bonds for your company for the past five ears:

Information provided in this application may be audited by the City of Sun Prairie.

Provision of information on Form C does not relieve your company from providing the same or additional information as requested in a response to a request for proposal.

Submittal of Form C does not guarantee qualification. Qualification will be given only if your company meets all statutory, regulatory or City requirements, including those not listed on this application. Qualification does not guarantee your company any business.

Your company must update significant information changes in writing within 30 days. Significant changes include, but are not limited to: change of legal status, TIN, ownership, name, address, as well as loss of licensure or registration, filing of bankruptcy, or suspension by any federal, state, or local government agency.

Failure to provide accurate and reliable information required by this form may, in accordance with any and all applicable laws, result in penalties including, but not limited to, suspension or debarment from doing business with the City of Sun Prairie and termination of contracts.