



Appendix C: Bidder Profile & Certification

Bidder Name	
Trade License # (if applicable)	
Contact Person	
Street Address with City, State/Province & Zip / Postal Code	
Mailing Address (if different)	
Phone #	
Email Address	
Bidder will perform the services as:	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Corporation
Date & State/Province of Incorporation	
Name of Partnership or JV	

By signing below, the submission of qualifications shall be deemed a representation and certification by the bidder that it has read and understood all aspects of the RFP.

Bidder's Signature	
Date Signed	
Title of Authorized Signatory	