

PROPOSER'S INFORMATION

Legal name of proposer: _____

Data universal numbering system (duns) number: _____

Type of business/description of products and/or services provided: _____

Proposer's mailing address: _____

City: _____ State: _____ Zip code: _____

Proposer's street address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ Fax: _____

Contact person's name: _____

Contact person's telephone number: _____ Fax: _____

Contact person's e-mail address: _____

1. Type of business entity: ☐ publicly traded corporation ☐ private corporation
☐ limited partnership ☐ partnership ☐ sole proprietorship ☐ not for profit entity

2. Number of full time employees: _____ Number of part time employees: _____

3. City and state of Proposer's principal place of business: _____

If not Texas, does the state have preferential treatment on bids? ☐ Yes ☐ No

if yes, what percentage: _____%

4. Number of years Proposer has been in continuous operation: _____

5. Number of years Proposer has been in business under its present business name: _____

6. Has Proposer conducted business with the district under another name? ☐ Yes ☐ No

If yes, provide other name(s) : _____

PROPOSER'S INFORMATION, continued

7. Number of years doing business with SBISD: _____

8. Does Proposer have a parent company or subsidiary that currently conducts or that has previously conducted business with the District? ☐ Yes ☐ No

If yes, name of parent company and/or subsidiary: _____

9. Does Proposer have any owners, principal shareholders or stockholders, officers, agents, salespeople or key employees who have been members of the SBISD Board of Trustees during the last 5 years?

☐ Yes ☐ No

If yes, name(s) and title(s): _____

10. Does any officer, partner, owner, sales representative and/or spouse work for SBISD?

☐ Yes ☐ No

11. Does Proposer have any owners, principal shareholders or stockholders, officers, agents, salespeople or key employees who are district employees or who are members of a district employee's immediate family who either work or who may potentially work on this contract with the district?

☐ Yes ☐ No

If yes, name(s) and title(s): _____

12. Names of authorized agents, including any person or entity authorized to 'act with' or 'act on your behalf,' such as consultants, sub-contractors, re-sellers, lobbyists, confidants, etc., whether compensated or not compensated:

13. Does Proposer have relationship(s) with any political action committees? ☐ Yes ☐ No

If yes, name(s) of PAC(s): _____

14. Has Proposer (including any owner, principal shareholder or stockholder, officer, agent, salesperson, or employee) been involved in past, pending, or present litigation involving the District?

☐ Yes ☐ No

If yes, please provide the style and status of the case as well as the type of litigation:

PROPOSER'S INFORMATION, continued

15. Financial and business references, including bank with which Proposer conducts business:

Name of bank with which Proposer conducts business: _____

Bank officer: _____ Officer's phone number: _____

Name of other banking/financial institution(s): _____

16. Name of insurance companies:

Insurance Companies	Insurance Companies

17. Check one of the following: ☐ Proposer will provide goods and services with own work force

☐ Proposer will purchase goods directly from the manufacturer or other proposer

18. SBISD can only do business with equal opportunity employers.

Do you advertise as an equal opportunity employer? ☐ Yes ☐ No

Do you have a written non-discriminatory policy of employment? ☐ Yes ☐ No

Has this policy been circulated throughout your organization? ☐ Yes ☐ No

Person to contact regarding equal opportunity information issues:

Name: _____ Title: _____

I attest that I have answered the questions regarding proposer information truthfully and to the best of my knowledge.

Name of Proposer's Authorized Official: _____
(Type or printed)

Title of Proposer's Authorized Official: _____
(Type or printed)

Signature of Proposer's Authorized Official: _____

Date Signed: _____