



Longview ISD

**REQUEST FOR
QUALIFICATIONS**

MAIL OR HAND-DELIVER TO:

Longview ISD
ATTN: ADMINISTRATION OFFICE
1301 E. Young St
Longview Tx 75602

General Request for Qualifications (RFQ)

The Longview Independent School District is seeking an Architect to provide design and construction administration services.

Intent of Request for Qualifications:

The Board of Trustees of the Longview Independent School District is seeking to retain an architectural firm with the qualifications and staff resources necessary to perform planning, designing, bidding and construction oversight phases of various projects deemed to be in the best interest of the District. In addition the District is looking for a firm with the capability to provide value added services including, but not limited to structural engineering, security consultation, technology consultation, interior design, etc. Therefore, it is the intent of the Board to obtain information in the request for qualifications that addresses these options.

General Qualifications

The Architect should have expertise and extensive experience in developing plans for Texas School Districts or other public facilities with similar regulatory and legal requirements. The Architect need not have a local office. However, the Architect should have experience and knowledge of local construction practices, procedures, regulations, soil and environmental conditions.

At a minimum the response to the RFQ must contain the following:

1. Name of architect and firm
2. Business address
3. Contact individual, telephone, telephone and e-mail address
4. Type of organization (i.e. partnership, corporation, etc.)
5. General statement of qualifications
6. History of firm and principals including
 - a. Years in business – if less than five years, previous experience of principals is critical
 - b. Years in business under present name
 - c. The former names, if any, your organization has operated under
 - d. Experience of business principals
7. Key personnel proposed to be assigned to the District
8. Registrations, licenses, and certifications
9. General experience and experience related to school district planning and construction. Include a list and brief description of **all major projects** performed in the last five years.
10. Experience related to design of Texas school buildings. Include a list and brief description of all major **Texas school projects** performed in the last five years.
11. If the Architect is not a firm with a local office,
 - a. Indicate the means by which it acquired experience in the **Longview** area and knowledge of local construction practices, procedures, regulations, soil and environmental conditions.
 - b. Also indicate the means by which a non-local architectural firm will communicate and collaborate with the District and community in the design of the building given the distance from the architect's office to the District.
12. State whether an officer or principal of your organization has been an officer or principal of another organization in the past five years when it failed to complete a project. If yes, provide details.

13. List the major projects your organization has in progress, giving the name and location of the project, owner, contract amount, percentage complete, and scheduled completion date.
14. List and explain claims and litigation involving the firm in the last 5 years including arbitration proceedings, including:
 - a. Whether your organization has ever failed to complete any work awarded to it
 - b. If there are any judgments, claims, arbitration proceedings, or suits outstanding against your organization or its officers?
 - c. If your organization has filed any lawsuits or requested arbitration with regard to projects within the last 5 years
15. Provide statement regarding the ability of the firm to provide the following:
 - a. Insurance certificates
 - b. Audited financial statements
16. Provide business references
17. List any professional services provided by your organization (architectural planning, design, construction administration, engineering, mechanical engineering, electrical engineering, structural engineering, interior design, civil engineering, etc.)

Interested firms are encouraged to submit their qualifications as soon as possible, but in no case later than the due date.

Qualification Based Selection Process:

Professional services will be procured in accordance with Chapter 2254 of the Government Code, Title 10, Subchapter A, Professional Services. Selection of the most highly qualified Respondent will be made on the basis of demonstrated competence and qualifications as determined by the Board of Trustees of the **Longview** Independent School District based upon the Qualifications submitted in response to this RFQ.

SELECTION PROCESS:

Firms are requested to submit their qualifications outlining their background and experience in campus planning and building design. Selected firms may be invited to participate in interviews. Once the most qualified firm is determined, the District will attempt to negotiate a fee. If a fee cannot be agreed upon, negotiations will begin with the next most qualified firm. Once an agreement is reached, the selected firm's name will be submitted for the final approval by the Longview ISD Board of Trustees.

TENTATIVE SCHEDULE:

January 24, 2022	RFQ Document Released
February 3, 2022	RFQ responses due no later than 1:00 P.M. CST
February 7, 2022	Interviews if deemed necessary
February 8, 2022	Select finalist to begin negotiations
February 14, 2022	School Board meeting/final approval

SUBMITTAL:

Submit one original and four (4) copies of the RFQ to the following:

Longview ISD
Administration Office
1301 E Young St
Longview Tx 75602

Please mark on the outside of the envelope **"RFQ #20-01"**.

RFQ #20-01
TERMS AND CONDITIONS CERTIFICATION

Issuance of this RFQ does not commit the District to award any Architect or pay any costs incurred in the preparation of a response to this request.

The District may ask respondents to send a representative for an oral interview prior to a formal selection. The District will not be liable for any costs incurred by the proposer in connection with such an interview.

The District reserves the right to waive any formality related hereto.

By submitting a response to this RFQ, each respondent agrees to waive any and all claims it has or may have against the school district and its trustees, employees and officers, including, but not limited to, those arising out of or in connection with the administration, evaluation, or recommendation of any response or proposal; waiver of any requirements under this RFQ, or the Contract Documents; acceptance or rejection of any response or proposal; and award of a contract.

By my signature below, I warrant that I am authorized to sign on behalf of my organization, and that I have read, understand, and agree with all the terms of this Request for Qualifications.

Name of Proposer

Date

Signature

LONGVIEW INDEPENDENT SCHOOL DISTRICT REFERENCES

REFERENCES: Proposal must include three school district, college, or governmental references for which your firm has provided similar products/services. Please include company name, name of contact person and telephone number or e-mail address of reference.

COMPANY NAME	CONTACT PERSON/TITLE	PHONE # OR E-MAIL
_____	_____	_____
_____	_____	_____
_____	_____	_____

The undersigned Bidder, by signing and executing this bid, certifies and represents to the Longview Independent School District that Bidder has not offered, conferred or agreed to confer any pecuniary benefit, as defined by § 1.07(a)(6) of the Texas Penal Code, or any other thing of value, as consideration for the receipt of information or any special treatment or advantage relating to this bid; the Bidder also certifies and represents that the Bidder has not offered, conferred or agreed to confer any pecuniary benefit or other things of value as consideration for the recipient's decision, opinion, recommendation, vote or other exercise of discretion concerning this bid; the Bidder certifies and represents that Bidder has neither coerced nor attempted to influence the exercise of discretion by any officer, trustee, agent or employee of the Longview Independent School District concerning this bid on the basis of any consideration not authorized by law; the Bidder also certifies and represents that Bidder has not received any information not available to other bidders so as to give the undersigned a preferential advantage with respect to this bid; the Bidder further certifies and represents that Bidder has not violated any state, federal or local law, regulation or ordinance relating to bribery, improper influence, collusion or the like and that Bidder will not in the future, offer, confer, or agree to confer any pecuniary benefit or other thing of value of any officer, trustee, agent or employee of the Longview Independent School District in return for the person having exercised the person's official discretion, power or duty with respect to this bid; the Bidder certifies and represents that it has not now and will not in the future offer, confer, or agree to confer a pecuniary benefit or other thing of value to any officer, trustee, agent or employee of the Longview Independent School District in connection with information regarding this bid, the submission of this bid, the award of this bid or the performance, delivery or sale pursuant to this bid.

FIRM NAME _____

SIGNED BY _____

PRINTED NAME _____

TITLE _____

DATE _____

NON-COLLUSIVE BIDDING CERTIFICATE

Vendors shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, or national origin. Bidder must certify that the company complies with Executive Order 11246, entitled "Equal Employment Opportunity," as amended by Executive Order 11375 and as supplemented in Department of Labor Regulations.

By submission of this bid, the bidder certifies that:

- a. This bid has been independently arrived at without collusion with any other bidder or with any competitor.
- b. This bid has not been knowingly disclosed and will not be knowingly disclosed, prior to the opening of the bids for this project to any other bidder or potential competitor.
- c. No attempt has been or will be made to induce any other person, partnership or corporation to submit or not to submit a bid.
- d. The person signing this bid certified that he has fully informed himself regarding the accuracy of the statements contained in this certification, and under the penalties being applicable to the bidder as well as to the person signing in its behalf.

AUTHORIZED SIGNATURE

NAME OF COMPANY

PRINTED NAME

TITLE OF AUTHORIZED PERSON

TELEPHONE NUMBER

ADDRESS

DATE

CITY STATE ZIP

Certification Regarding Lobbying

Submission of this certification is a prerequisite for making or entering into this transaction and is imposed by section 1352, Title 31, U.S. Code. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the awarding of a Federal contract, the making of a Federal grant, the making of a Federal loan, the entering into a cooperative agreement, and the extension, continuation, renewal, amendment, or modification of a Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of

Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all covered subawards exceeding \$100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.

Name of Organization

Address of Organization

Name/Title of Submitting Official

Signature

Date

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure)

Approved by 0MB

0348-0046

1. Type of Federal Action : a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: D a. bid/offer /application b. initial award c. post-award	3. Report Type: D a. initial filing b. material change For material change only: Year ____ quarter ____ Date of last report
4. Name and Address of Reporting Entity: Prime Subawardee Tier_____, if Known: Congressional District, if known:		5. If Reporting Entity in o. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known :
6. Federal Department/Agency:		7. Federal Program Name/Description: CFDA Number, if applicable: _____
8. Federal Action number, if known :		9. Award Amount, if known: \$ _____
10. Name and Address of Lobbying Entity (if individual, last name, first name, MI) :		b. Individuals Performing Services (including address if different from No. 10a)(last name, first name, MI):
(Attach Continuation Sheet(s) SF-111-A, if necessary)		
11. Amount of payment (check all that apply): _____ Actual _____ Planned		13. Type of Payment (check all that apply): a. retainer b. one-time fee c. commission d. contingent fee e. deferred f. Other, specify: _____
12. Form of Payment (check all that apply): a. cash b. in-kind; specify: nature _____ value _____		
14. Brief Description of Services Performed or to be Performed Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11: (Attach Continuation Sheet(s) SF-111-A, if necessary)		
15. Continuation Sheet (s) SF-LLL-A attached: Yes		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for		Signature: _____ Date: _____ Title: _____ Telephone: _____
Federal Use Only:		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal Action.
2. Identify the status of the covered Federal Action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal Action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants, and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal Agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

SUSPENSION OR DEBARMENT CERTIFICATE

Non-Federal entities are prohibited from contracting with or making sub-awards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement for goods or services equal to or in excess of \$100,000.00. Contractors receiving individual awards for \$100,000.00 or more and all sub-recipients must certify that the organization and its principals are not suspended or debarred.

By submitting this offer and signing this certificate, this bidder:

Certifies that no suspension or disbarment is in place which would preclude receiving a federally funded contract under the Federal OMB, A-102, common rules.

AUTHORIZED SIGNATURE

NAME OF COMPANY

PRINTED NAME

TITLE OF AUTHORIZED PERSON

TELEPHONE NUMBER

ADDRESS

DATE

CITY STATE ZIP

LONGVIEW INDEPENDENT SCHOOL DISTRICT

Felony Conviction Notification

Section 44.034, Texas Education Code, Notification of Criminal History, Subsection (a), states "a person or business entity that enters into a contract with a school district must give advance notice to the district if the person or an owner or operator of the business entity has been convicted of a felony. The notice must include a general description of the conduct resulting in the conviction of a felony." Subsection (b) states "a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract."

This Notice Is Not Required of a Publicly-Held Corporation

I, the undersigned agent for the firm named below, certify that the information concerning notification of felony convictions has been reviewed by me and the following information furnished is true to the best of my knowledge.

Vendor's Name: _____

Authorized Company Official's Name & Title (Printed)

Complete ONE of the following as appropriate:

- A. My firm is a publicly-held corporation; therefore, this reporting requirement is not applicable.

Signature of Company Official **Date**

- B. My Firm is not owned or operated by anyone who has been convicted of a felony:

Signature of Company Official **Date**

- C. My firm is owned or operated by the following individual(s) who has/have been convicted of a felony:

Name(s) of Felon(s): _____

Details of Conviction(s): _____

Signature of Company Official **Date**

RESIDENT/NONRESIDENT BIDDER CERTIFICATION

FAILURE TO COMPLETE THE FOLLOWING INFORMATION WILL RESULT IN BID DISQUALIFICATION

As defined by Texas House Bill 620, a "nonresident bidder" means a bidder whose principal place of business is not in Texas, but excludes contractor whose ultimate parent company or majority owner has its principal place of business in Texas.

Please complete either item 1 or 2 as it applies to your company along with the bottom section.

- 1) I certify that my company, _____, is a "resident bidder".
(Company Name)

Signature: _____ Date: _____

OR

- 2) If you qualify as a "nonresident bidder," you must furnish the following information.

What is your resident state? (The state your principal place of business is located).

City _____ State _____ Zip Code _____

Company Name _____

- a) Does your "residence state" require bidders whose principal place of business is in Texas to under bid bidders whose residence state is the same as yours by a prescribed amount or percentage to receive a comparable contract? "Residence state" means the state in which the principal place of business is located.

YES _____ NO _____

- b) What is the amount or percentage? _____ %

ALL VENDORS MUST COMPLETE THE FOLLOWING:

I certify that the above information is correct.

Typed Name Position

Signature Date

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

OFFICE USE ONLY

Date Received

This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity.

By law this questionnaire must be filed with the records administrator of the local government not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.

A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

1 Name of person doing business with local governmental entity.

2

☐

Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3 Name each employee or contractor of the local governmental entity who makes recommendations to a local government officer of the governmental entity with respect to expenditures of money AND describe the affiliation or business relationship.

4 Name each local government officer who appoints or employs local government officers of the governmental entity for

which this questionnaire is filed AND describe the affiliation or business relationship.

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

Page 2

For vendor or other person doing business with local governmental entity

5 Name of local government officer with whom filer has affiliation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)

This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or other relationship. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire?

☐

Yes

☐

No

B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity?

☐

Yes

☐

No

C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

☐

Yes

☐

No

D. Describe each affiliation or business relationship.

6

Signature of person doing business with the governmental entity

Date

INFORMATION ONLY

CERTIFICATE OF INTERESTED PARTIES – FORM 1295

Longview ISD (LISD) is required to comply with House Bill 1295, which amended the Texas Government Code by adding Section 2252.908, Disclosure of Interested Parties. Section 2252.908 prohibits LISD from entering into a contract resulting from this RFQ with a business entity unless the business entity submits a Disclosure of Interested Parties (Form 1295) to LISD at the time business entity submits the signed contract. The Texas Ethics Commission has adopted rules requiring the business entity to file Form 1295 electronically with the Texas Ethics Commission.

“Interested Party” means a person:

- a) who has a controlling interest in a business entity with whom LISD contracts; or
- b) who actively participates in facilitating the contract or negotiating the terms of the contract, including a broker, intermediary, adviser, or attorney for the business entity.

“Business Entity” means an entity recognized by law through which business is conducted, including a sole proprietorship, partnership, or corporation.

As a “business entity,” the awarded vendor must electronically complete, print, sign, notarize, and submit Form 1295 before entering into a contract with LISD even if no interested parties exist.

The Vendor must file Form 1295 electronically with the Texas Ethics Commission using the online filing application, which can be found at https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm. The Vendor must print a copy of the completed form, which will include a certification of filing containing a **unique certification number**. The Form 1295 must be signed by an authorized agent of the business entity, and the form must be notarized.

The completed Form 1295 with the certification of filing must be filed with LISD prior to any official contract award.

Longview ISD must acknowledge the receipt of the filed Form 1295 by notifying the Texas Ethics Commission of the receipt of the filed Form 1295 no later than the 30th day after the date the contract binds all parties to the contract. After LISD acknowledges the Form 1295, the Texas Ethics Commission will post the completed Form 1295 to its website with seven business days after receiving notice from LISD.

House Bill 89 VERIFICATION

I, _____, the undersigned representative of
_____ Company or Business name

(hereafter referred to as company) being an adult over the age of eighteen (18) years of age,
verify that the company named-above, under the provisions of Subtitle F, Title 10,
Government Code Chapter 2270:

1. Does not boycott Israel currently; and
2. Will not boycott Israel during the term of the contract the above-named
Company, business or individual with the Longview Independent School
District.

Pursuant to Section 2270.001, Texas Government Code:

1. *“Boycott Israel” means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and*
2. *“Company” means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.*

DATE

SIGNATURE OF COMPANY REPRESENTATIVE

SB 252

CHAPTER 2252 CERTIFICATION

I, _____, the undersigned representative of _____ (Company or business name) being an adult over the age of eighteen (18) years of age, pursuant to Texas Government Code, Chapter 2252, Section 2252.152 and Section 2252.153, certify that the company named above is not listed on the website of the Comptroller of the State of Texas concerning the listing of companies that are identified under Section 806.051, Section 807.051 or Section 2253.153.

I further certify that should the above-named company enter into a contract that is on said listing of companies on the website of the Comptroller of the State of Texas which do business with Iran, Sudan or any Foreign Terrorist Organization, I will immediately notify the Longview Independent School District's Business Office.

Name of Company Representative (Print)

Signature of Company Representative

Date

Longview Independent School District
Substitute Form W-9: Request for Taxpayer Identification Number and Additional Contact
Information

PLEASE TYPE OR PRINT LEGIBLY

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:

☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/Estate

☐ Limited liability company. Enter the tax classification. (C=C corporation, S=S corporation, P=partnership) _____

☐ Other _____

Exemptions:

Exempt payee code
(if any) _____

Address (number, street, & apt. or suite number)

City, state, & ZIP code

Primary Phone

Primary e-mail

TAXPAYER IDENTIFICATION NUMBER

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). For guidance, please see the General Instructions section of IRS Form W-9, available at <http://www.irs.gov/w9>.

Social Security Number

- -

OR Employer Identification Number

-

CERTIFICATION

Under penalties of perjury, I certify that:

1. 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
2. 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 not longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined in the General Instructions).

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 IRA, and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

**Sign
Here**

Signature of
U.S. person ⇨

Date ⇨

ADDITIONAL INFORMATION

**Remittance Address
(if different)**

Number, street, & apt. or suite number

City, state, & ZIP code

Billing Phone Number

Billing e-mail

**Order-From Address
(if different)**

Number, street, & apt. or suite number

City, state, & ZIP code

Sales/Order Contact Name

Sales Phone Number

Sales e-mail

Cooperative Purchasing Information

Please mark any purchasing cooperatives(s) with which your company **currently** holds an award or contract.

☐

☐ Buyboard

☐

TCPN

☐ U. S. Communities

☐

TIPS/TAPS

☐ State of Texas (TX-MAS, DIR, etc.)

☐ Other _____

Sole Source Distributor

Is your company the sole distributor of all or some of the products sold? **If yes, you must also complete a [Notarized Sole Source Declaradon form](#).**

☐ Yes— all products

☐ Yes— certain products

☐ No