## Exhibit "E"

## **Questionnaire and Information Form**

## OFFEROR QUESTIONNAIRE AND INFORMATION FORM

	BU	SINESS AND CONTACT INFORMAT	ΓΙΟΝ	
Business Name:		Fe	Federal Tax ID #	
Address:		City/State/Zip:		
Contact Name:		Phone #:	Fax #:	
E-Mail:		Web Site:		
Number of `	Years been in Business:	<del> </del>		
Type of Bus	siness Entity: Corporation	LLC LP LLP Other		
In What Sta	te & Year Did Business Organ	ize in Your Current Structure:		
Full Legal N	Name of Parent or Holding Con	npany, if any:		
(Note: if th	nere are several tiers of owners	hip, attach a corporate organizational	chart)	
Services Pro	ovided by Business:			
	CON	TRACT INFORMATION/PERFORM	ANCE	
In the nact tl	hree (3) years, has Business:			
•		on? Yes \( \square\) No \( \square\) If yes, attach expl	anation	
		as awarded? Yes $\square$ No $\square$ If no, att		
	-	rly completion of work? Yes \(\sigma\) No		
		s No If yes, attach details.		
		nages? Yes \(\sigma\) No \(\sigma\) If yes, attach de	etails.	
	•			
other docum and has dete equipment,	nents herein; (b) that through i	ts authorized personnel it has personal eter of the proposed work and the super tie in compliance with the specification	Terms and Conditions, Scope of Work, and all lly examined the location of the proposed work ervision, labor, tools, material as identified, and and contract documents (if applicable); and	
SIGNATURE:		TITLE:		
	NAME.	DATE		