Exhibit B

Questionnaire and Information Form

CONTRACTOR QUESTIONNAIRE AND INFORMATION FORM

Contractor MUST complete this form in its entirety. If a question is not applicable, Contractor should state "not applicable".

BUSINESS AND CONTACT INFORMATION			
Business Name:	Federal Tax ID #		
Address:	City/State/Zip:		
Contact Name:	Phone #:	Fax #:	
E-Mail:	Web Site:		
Number of Years been in Business:			
Type of Business Entity: Corporation	n 🗌 LLC 🗌 LP 🗌 LLP 🗌 Other 🗌		
In What State & Year Did Business C	Organize in Your Current Structure:		
Full Legal Name of Parent or Holding Company, if any:			
(Note: if there are several tiers of ov	vnership, attach a corporate organizational c	hart)	
Services Provided by Business:			

CONTRACT INFORMATION/PERFORMANCE

In the past three (3) years, has Business:

(a) Been engaged in any litigation? Yes 🗌 No 🗌 If yes, attach explanation.

(b) Completed all contracts it was awarded? Yes 🗌 No 🗌 If no, attach details.

(c) Been awarded a bonus for early completion of work? Yes 🗌 No 🗍. If yes, attach details.

- (d) Defaulted on a contract? Yes 🗌 No 🗌 If yes, attach details.
- (e) Been assessed liquidated damages? Yes 🗌 No 🗌 If yes, attach details.

The undersigned Contractor declares: (a) that it has reviewed and agrees to the terms and conditions of the RFP, proposed form of Contract, and all other documents incorporated or referenced in the RFP; (b) that through its authorized personnel it has personally examined the location of the proposed work and has determined the amount and character of the proposed work and the supervision, labor, tools, material as identified, and equipment, necessary to complete the same in compliance with the specifications and contract documents (if applicable); and (c) that Contractor has no conflict of interest, as defined in the RFP.

SIGNATURE:	TITLE:	

PRINTED NAME:______DATE:_____