

**List of Required Exhibits – Request for Qualifications Abatement & Demolition
of Residential Structures
RFQ #10.29.18**

Exhibit	Document Title
A	Organizational Information
B	IRS Form W-9
C	Resolution of Corporate Authority
D	Certificate of Good Standing OR Certificate of Existence
E	Proof of Experience
F	Wrecking License
G	Two Years of Corporate Tax Returns OR Two Years of Audited Financial Statements
H	Letter from Bonding Agent and Power of Attorney Affidavit
I	Approved City of Detroit Income Tax Clearance
J	Approved City of Detroit Accounts Receivable Clearance
K	Fraud, Waste & Abuse, Negligence and Debarment/Suspension Affidavit
L	Non-Collusion Affidavit
M	Workers' Qualification Affidavit
N	Covenant of Equal Opportunity
O	Slavery Era Records and Insurance Disclosure
P	Statement of Political Contributions and Expenditures Affidavit
Q	Acceptance of Detroit Land Bank Authority Discipline Policies Acknowledgement Form
R	RFQ Submission Affidavit

Exhibit A
Organizational Information

Respondents must attach a completed copy of the following Organizational Information Form.

Organizational Information

Respondent's Exact Legal Name*: _____

*(*This name should be the same as the name used in all other documents and affidavits, e.g., "Demolition Company, LLC", "Demolition Company", and "Demolition Company, Inc." are all considered different companies.)*

U.S. State in which Respondent's Legal Entity is organized: _____

Respondent's Type of Legal Entity (check one)

- ☐ Sole Proprietorship
- ☐ Partnership
- ☐ Corporation
- ☐ Limited Liability Corporation
- ☐ Limited Liability Partnership
- ☐ Other: _____

Respondent's Taxpayer ID Number: _____

Respondent's Address:

Street: _____
City: _____
State: _____
Zip Code: _____

Respondent's Website Address: _____

Respondent's Phone Number: _____

Point of Contact Information:

Name: _____
Title: _____
Phone Number: _____
Email Address: _____
Address (if different from above):
Street: _____
City: _____
State: _____
Zip Code: _____

Please check off if your organization identifies as any of the following:

(This information is solely for data collection purposes and will not affect your likelihood of being pre-qualified or receiving a bid.)

- | | |
|---|--|
| <input type="checkbox"/> MBE Certified | <input type="checkbox"/> WBE Certified |
| <input type="checkbox"/> VOSB Certified | <input type="checkbox"/> Other: |

Exhibit B
IRS Form W-9

Respondents must attach their current, completed, signed, and dated IRS Form W-9.

Exhibit C
Resolution of Corporate Authority

Respondents must attach a copy of the following Resolution with original signature in blue ink, dated after the release of this RFQ.

Resolution of Corporate Authority

I, _____ Corporate Secretary of _____, a Michigan Corporation (the "Corporation"), certify that the minutes of the meeting of the Board of Directors or Articles of Incorporation now in full force and effect, include language similar to or reflect the information embodied below:

"RESOLVED, that the Chairperson, the President, each Vice President, the Treasurer, and the Secretary and each of them, hereby is authorized to execute and deliver, in the name and on behalf of the Corporation and under its corporate seal or otherwise, any agreement or other instrument or document ('Contract') in connection with any matter of transaction that shall have been duly approved; and the execution and delivery of any agreement, or document, or other instrument, or document in connection with any matter of transaction that shall have been duly approved; the execution and delivery of any Contract by any of the aforementioned officers shall be conclusive evidence of such approval."

FURTHER, I CERTIFY that

_____ is Chairperson/President of the Board, and

_____ is Vice Chairperson/Vice President, and

_____ is/are Vice President(s),

_____ is Treasurer,

_____ is Secretary,

_____ is (names other offices)

FURTHER, I CERTIFY that any of the aforementioned officers or employees of the Corporation are authorized to execute or guarantee and commit the Corporation to the conditions, obligations, stipulations and undertakings entered into between the DLBA and the Company in order to perform the Services as outlined in the Agreement.

FURTHER, I CERTIFY that the Corporation has a duty to identify and disclose any contract(s), including any contract involving an employment or consulting relationship, which the Corporation, or any of the aforementioned officers or employees of the Corporation, currently has with the Detroit Land Bank Authority, the Detroit Building Authority, the City of Detroit, or with any of their board members or officers.

[Signatures commence on the following page]

IN WITNESS THEREOF, I have set my hand this _____ day of _____, 201_.

Signature of Corporate Secretary

CORPORATE SEAL
(if any)

PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF YOUR CORPORATION MUST BE ONE OF THE INDIVIDUALS LISTED ABOVE AS A PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON BEHALF OF THE CORPORATION. THE TERM CORPORATION SHALL INCLUDE S-CORPS, C-COPRS, LLC, PLLC, PARTNERSHIPS, SINGLE-MEMBER LLC, JOINT VENTURES AND SOLE PROPRIETORSHIPS.

This document was acknowledged, subscribed and sworn before me this _____ day of

_____, 201_, by _____,

_____, of _____ [Contractor].

Signature of Notary

Printed name of Notary

Notary Public, State of Michigan, County of: _____

My commission expires: _____

Acting in the County of: _____

Exhibit D
Certificate of Good Standing OR Certificate of Existence

Respondents must attach their current, valid and active Certificate of Good Standing or Certificate of Existence issued by the Michigan Department of Licensing and Regulatory Affairs (only 2018 or 2019 Certificates will be accepted).

Exhibit E

Proof of Experience

The Respondent (meaning the legal entity **not** corporate officers, owners, employees, etc.) must provide evidence of a minimum of five (5) years of proven experience providing professional demolition services or services of a similar scope. The DLBA reserves the right to determine the similarity of any previous experience with demolition services. Professional demolition services or services of a similar scope include but are not limited to:

- Construction
- Construction Management or Building Trades
- Abatement of asbestos-containing and/or hazardous materials
- Environmental Remediation
- Residential or Commercial Excavation
- Facility Decommissioning

Attach the evidence on a separate sheet. Please include the following:

- Project name and location
- Name of organization that completed the work
- Project owner
- Owner contact information
- Project description
- Start date and completion date

Exhibit E: Proof of Experience

Contractor Name:	
Project Name:	
Project Location:	
Name of Organization that completed the work:	
Project Description:	
Project Start - Completion Date:	
Project Owner Contact Information:	

Exhibit F
Wrecking License

Each Respondent must provide a current and valid Class A or Class B Wrecking License issued by the City of Detroit. The name on the Wrecking License must match the contractor's exact legal name, as provided in Exhibit A.

Exhibit G
Two Years of Corporate Tax Returns OR Two Years of Audited Financial Statements
(CONFIDENTIAL)

Each Respondent is required to present evidence of financial stability from the **2016 and 2017 tax years**, which must include one of the following options:

1. Two years of **signed/dated** corporate tax returns, which must include Form 1120, Form 1120S, or Form 1065 and all applicable Schedules. If corporate tax returns were filed electronically, Respondents must attach receipt to confirm electronic filing.

OR

2. **Audited** Financial Statements prepared by a Certified Public Accountant (CPA) on company letterhead with an unmodified/unqualified opinion. Financial Statements must include a(n) balance sheet, income statement (profit & loss statement), statement of cash flows, and notes to financial statements.

Exhibit H
Letter from Bonding Agent and Power of Attorney Affidavit

Respondent must attach a letter from a Bonding Agent authorized to do business in the state of Michigan, which includes the bonding company rating, the bonding company's financial size category, and the respondent's bonding line of credit (both single job and aggregate). **The letter MUST be dated after the release date of this RFQ.** Respondent must also provide the Power of Attorney affidavit, which indicates the authorization to execute, seal, and/or acknowledge the bond.

Exhibit I
Approved City of Detroit Income Tax Clearance

Respondent must use the City of Detroit's Income Tax Clearance Application on the following page. Only **approved** clearance applications will be accepted. Pre-qualified vendors will be responsible for updating an expired clearance and notifying the designated DLBA point(s)-of-contact. Failure to maintain current forms may result in revocation of a pre-qualified status.



REQUEST FOR INCOME TAX CLEARANCE

REQUESTING DEPARTMENT/DIVISION: _____

E-MAIL ADDRESS: _____

CONTACT NAME: _____ PHONE: _____ FAX: _____

Type of Clearance: ☐ New ☐ Renewal (Please submit 30 days prior to submitting bid or expiration date)

A. To: City of Detroit
Income Tax Division
Coleman A. Young Municipal Center
2 Woodward Avenue, Ste. 1220
Detroit, MI 48226
Phone: (313) 224-3328 or 224-3329
Fax: (313) 224-1741 or 224-4588

For: Individual _____
and/or
Company Name _____
Address _____
City _____
State _____ Zip Code _____
Telephone _____ Fax # _____
E-mail Address _____

B. Name of Chief Financial Officer/Authorized Contact Person (include address if different from above)	Telephone # _____ Fax # _____
Employer Identification or Social Security Number	Spouse Social Security Number

Nature of Contract _____

BID CONTRACT AMOUNT (if known):
Labor: \$ _____ Material: \$ _____
Contract # (if known) _____

C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.

Check One: ☐ Individual ☐ Corporation ☐ Partnership ☐ Estate & Trust

INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

1. Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above) ☐ Yes ☐ No
2. Are you a student, and/or claimed as a dependent on someone else's tax return? ☐ Yes ☐ No
3. Were you employed in the City of Detroit during the last seven (7) years? ☐ Yes ☐ No
4. Were you a resident of Detroit during the last seven (7) years? ☐ Yes ☐ No

CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

5. Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS-4). ☐ Yes ☐ No
6. Will the company have employees working in Detroit? ☐ Yes ☐ No
7. Will the company use sub-contractors or independent contractors in Detroit? ☐ Yes ☐ No

D. FOR INCOME TAX USE ONLY

Has the contractor complied with the provisions of the City Income Tax Ordinance?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature _____	Date _____	Expires _____

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: www.detroitmi.gov

NOTE: An approved Income Tax Certificate may be used in multiple city wide departments that require a bid. **Please e-mail your completed request form (preferably in pdf format) to: IncomeTaxClearance@detroitmi.gov**

Requirements For Income Tax Clearance

Background. The City of Detroit is authorized to levy an income tax under the Uniform City Income Tax Ordinance (No.900-F) set forth in Chapter 2 of Act 284 of the Public Acts of 1964, known as the "City Income Tax Act." "No bid shall be accepted from or contract awarded to any person who is in arrears to the City..." see Detroit codes: Sec.18-5-13, Sec. 18-10-25 and General Conditions# 28.

What Is An Income Tax Clearance? An **approved** Income Tax Clearance states that an individual, business or subcontractor seeking employment or contracts with the City of Detroit has complied with all the provisions of the City Income Tax Ordinance. Contractors (individuals, businesses or Subcontractors) cannot be awarded a contract and are not authorized to perform services until they are in compliance with the City Income Tax Ordinance. **The "Request for Income Tax Clearance" form should be submitted 30 days prior to the submission for new bids or renewals of contract extensions.** **Please e-mail your completed request form (preferably in pdf format) to: IncomeTaxClearance@detroitmi.gov**

Requirements For Individuals. Individuals must file returns and pay income taxes, and not have any unpaid assessments. Detroit residents must file formD-1040(R). If a taxpayer claims a non-resident status, proof will be required (copy of lease, mortgage closing statements, drivers license, voter's registration, ect.). If an individual seeking a tax clearance reside within the City, but claimed dependent status on another person's tax return, or received assistance, proof may be required.

Requirements For Businesses. Businesses must file Corporation (D-1120) or Partnership (D-1065) returns, regardless of net profit or loss. Non-profit organizations are required to file D-1120 tax return based on non-related income. All employers located in the City or "doing business within the City" must withhold City of Detroit income taxes from employees' compensation. Employers subject to withholding tax must file monthly or quarterly forms D-941/501, as well as, form DW-3 (Annual Reconciliation) with W2's. All assessments must be paid. New employers must request an Employer's Package and register with the City by completing and submitting an Employer's Withholding Registration form DSS-4. Contractors must supply a list of subcontractors with federal identification numbers or social security numbers. Contractors must also supply the federal identification numbers used for their leased employees.

Income Tax Clearance Denials. Income Tax Clearances are denied based on one or more of the following reasons:

1. Missing withholding payments, DW-3 Annual Reconciliation with W2's,
2. Unpaid assessments
3. Missing tax returns

Related data regarding taxpayers are confidential, therefore, reasons for denial are given only to the taxpayer or authorized representative with power of attorney. Taxpayers with denied clearances may visit our office to obtain information about their account or to submit requested information.

Appointments are not necessary. For additional information contact the Clearance Section at (313) 224-3328 or (313) 224-3329. Our office is located in the Coleman A. Young Municipal Center, 2 Woodward Avenue, Suite 1220. Office hours are 8:00 a.m. to 4:00 p.m., Monday through Friday.

Exhibit J
Approved City of Detroit Accounts Receivable Clearance

Respondent must use the City of Detroit's Request for Accounts Receivable Clearance Application on the following page. Only **approved** clearance applications will be accepted. Pre-qualified vendors will be responsible for updating an expired clearance and notifying the designated DLBA point(s)-of-contact. Failure to maintain current forms may result in revocation of a pre-qualified status.

CITY OF DETROIT

ACCOUNTS RECEIVABLE CLEARANCE APPLICATION
2 WOODWARD AVENUE, SUITE 106, COLEMAN A. YOUNG MUNICIPAL CENTER
REVENUE & TAX EXAMINATION OFFICE (313) 224-2389 / FAX: (313) 224-1901 / RevenueCollections@DetroitMI.gov

☐ **SECTION A:** ☐ BUSINESS LICENSE ☐ BUDGET ☐ CITY COUNCIL ☐ DDOT ☐ DPW ☐ OCFO ☐ FIRE ☐ HEALTH
☐ CIVIL RIGHTS ☐ LAW ☐ MAYOR ☐ OMBUDSMAN ☐ HOUSING & REV ☐ POLICE ☐ PURCHASING
☐ RECREATION ☐ WATER & SEWAGE ☐ OTHER _____

ADDRESS OF DEPARTMENT _____
DATE SENT _____ CONTACT PERSON _____
PHONE NUMBER _____ FAX NUMBER _____
EMAIL _____ CONTRACT AMOUNT \$ _____

☐ **SECTION B: CORPORATION** LICENSE TYPE _____
CORPORATION NAME _____
ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
CITY PERSONAL PROPERTY NUMBER _____ **FID / EIN NUMBER** _____
OTHER CITY-OWNED PROPERTY PARCELS _____
CONTACT PERSON _____ PHONE NUMBER _____
EMAIL ADDRESS _____

☐ **SECTION C: PARTNERSHIP** LICENSE TYPE _____
BUSINESS NAME _____
BUSINESS ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
CITY PERSONAL PROPERTY NUMBER _____ **FID / EIN NUMBER** _____
A: PARTNER'S NAME _____ **PHONE NUMBER** _____
HOME ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
DRIVER'S LICENSE # _____
OTHER CITY-OWNED PROPERTY PARCELS _____
B. PARTNER'S NAME _____ **PHONE NUMBER** _____
HOME ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
DRIVER'S LICENSE # _____
OTHER CITY-OWNED PROPERTY PARCELS _____
CONTACT PERSON _____ PHONE NUMBER _____
EMAIL ADDRESS _____

☐ **SECTION D: SOLE PROPRIETORSHIP** LICENSE TYPE _____
BUSINESS NAME _____
BUSINESS ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
CITY PERSONAL PROPERTY NUMBER _____ **FID / EIN NUMBER** _____
OWNER'S NAME _____ DRIVER'S LICENSE # _____ PHONE NUMBER _____
HOME ADDRESS _____ CITY/STATE/ZIP _____ ☐ OWN ☐ LEASE
OTHER CITY-OWNED PROPERTY PARCELS _____
EMAIL ADDRESS _____

☐ **SECTION E: PERSONAL SERVICES**

NAME _____ ADDRESS _____ ☐ OWN ☐ LEASE

CITY/STATE/ZIP _____

PHONE NUMBER _____ DRIVER LICENSE # _____

OTHER PROPERTY ADDRESSES OWNED IN WITHIN DETROIT _____

SOCIAL SECURITY NUMBER _____

EMAIL ADDRESS _____

FOR TREASURY COLLECTION USE ONLY:

☐ APPROVED ☐ DENIED ☐ DENIED WITH ATTACHMENTS

SIGNATURE _____ DATE _____ CLEARANCE VALID UNTIL _____

Exhibit K
Fraud, Waste & Abuse, Negligence and Debarment/Suspension Affidavit

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

Pursuant to paragraph 5, if the Respondent is required to submit a statement, please prepare on company letterhead and include the following information:

- Contract #
- Date of Termination
- Reason for Termination
- Letter of Reinstatement

Fraud, Waste & Abuse, Negligence and Debarment/Suspension Affidavit

I, _____, state under oath:

1. I am the _____ of _____ [CONTRACTOR] (hereafter "Organization"), and am authorized to execute this affidavit and contractually bind the Organization.
2. The Organization has responded to a Request for Qualifications issued by the Detroit Land Bank Authority (hereafter "DLBA") for the environmental due diligence or abatement and demolition of certain residential properties.
3. The Organization has not been debarred, permanently suspended, proposed for debarment, declared permanently ineligible, voluntarily excluded or disqualified from bidding or receiving a public contract, nor are there proceedings pending relating to the Organization's responsibility, debarment, suspension, voluntary exclusions or qualifications to receive a public contract.
4. The Organization, including any principal, owner, director or partner, has never been found responsible for, nor is there a pending investigation in connection with, committing fraud, fraudulent misrepresentation, demolition-related negligence, theft-related crimes and/or any other illegal activity related to demolition activities by the City of Detroit Office of the Inspector General, any prosecutor's office, State Attorney General's Office or United States Attorney's Office.

5. I acknowledge that the Organization:

☐ HAS NOT ☐ HAS

within the two-year period preceding this affidavit, had one or more government or public transactions terminated for cause or default, nor has any government or public agency requested or required enforcement of any of its rights under a surety agreement on the basis of the Organization's default or in lieu of declaring the Organization in default.

If "HAS" was selected, please attach a statement on Organization letterhead and include the contract number, date of termination, and reason for termination. Please also include a letter of reinstatement.

6. I acknowledge that providing false or misleading information in connection with the DLBA's Demolition Program may violate Federal, State and/or local laws, including but not limited to 18 U.S.C. § 1001, and result in criminal or civil liability.
7. I acknowledge that if I or any employee of the Organization, including any principal, owner, director or partner, with an intent to defraud or cheat, designedly by false pretense, including any false statement or misrepresentation, obtains money, real or personal property, or the use of any instrument, facility, article or other valuable thing or service pursuant to my (our) participation in the DLBA's Demolition Program, shall be guilty of either a misdemeanor or a felony, punishable by imprisonment for not more than 10 years or a fine or both pursuant to MCL 125.1447.

8. I further acknowledge that should the Organization be selected as a pre-qualified vendor, the Organization has an express and ongoing obligation to disclose to the DLBA should any of the above-stated facts become untrue. Such disclosure shall be in writing and shall detail the fact(s) which cause the above-stated facts to become untrue.

_____[CONTRACTOR]

Dated: _____

By: _____

Its: _____

This document was acknowledged, subscribed and sworn before me this ____ day of _____, 201_, by _____, _____, of _____[CONTRACTOR].

Signature of Notary

Printed name of Notary

Notary Public, State of Michigan, County of: _____

My commission expires: _____

Acting in the County of: _____

Exhibit L
Non-Collusion Affidavit

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

Non-Collusion Affidavit

I, _____, state under oath:

1. I am the _____ of _____ [CONTRACTOR] (hereafter "Organization"), and authorized to execute this affidavit and contractually bind the Organization.
2. I am fully informed respecting the preparation and contents of the attached Qualifications or Proposal and of all pertinent circumstances respecting such Qualifications or Proposal;
3. Such Qualifications or Proposal, as well as any Hardest Hit Fund Proposal submitted by this Organization, are/is genuine and are/is not collusive or a sham;
4. Neither this Proposing Organization nor any of its officers, members, partners, owners, agents, representatives, employees or parties in interest, including this affiant, has in any way colluded, or conspired, directly or indirectly, or sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices in the attached Proposal or any other Proposer, or to fix any overhead, profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the Detroit Land Bank Authority, the Detroit Building Authority, the City of Detroit or any person interested in the proposed contract;
5. Any price or prices quoted in any Hardest Hit Fund Proposal submitted by this Organization, are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, members, partners or parties in interest, including this affiant.

[Signatures commence on the following page]

_____[CONTRACTOR]

Dated: _____

By:
Its:

This document was acknowledged, subscribed and sworn before me this ____ day of _____, 201_, by _____, _____ of _____ [CONTRACTOR].

Signature of Notary

Printed name of Notary
Notary Public, State of Michigan, County of: _____
My commission expires: _____
Acting in the County of: _____

Exhibit M
Worker's Qualifications Affidavit

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

Pursuant to paragraph 7, the Respondent must attach one of the following:

- 1) A copy of the Respondent's employment application to be used in connection with this RFQ or RFP

OR

- 2) A statement on company letterhead detailing the Respondent's hiring procedure and its compliance with the terms of paragraph 7

Worker's Qualifications Affidavit

I, _____, state under oath:

1. I am the _____ of _____ [CONTRACTOR] (hereafter "Organization"), and authorized to execute this affidavit and contractually bind the Organization.
2. The Organization has responded to a Request for Qualifications (hereafter "RFQ") or a Request for Proposals (hereafter "RFP") issued by the Detroit Land Bank Authority (hereafter "DLBA") for the environmental due diligence, or abatement and demolition of certain residential properties.
3. I acknowledge that the Organization possesses the qualified personnel, including management, office support staff and field staff, necessary to perform the services/work sought through this RFQ or RFP.
4. I acknowledge that, pursuant to the RFQ or RFP, the Organization is also required to possess and submit to the DLBA upon request evidence of all necessary licenses, certifications, accreditations or designations as required by Federal, State and local law to perform the services/work sought through this RFQ or RFP.
5. I acknowledge that the Organization will only permit those individuals, including subcontractors, who currently hold and maintain all the necessary licenses, certifications, accreditations or designations as required by Federal, State and local law to perform the services/work sought through this RFQ or RFP.
6. I acknowledge that should the Organization be selected as a pre-qualified vendor and/or receive an executed Agreement and Notice to Proceed, the Organization and all participating employees have an express and ongoing obligation to maintain all such necessary licenses, certifications, accreditations or designations current, and will provide the DLBA upon request with evidence of the same for the duration of the period of pre-qualification or executed Agreement.
7. I further acknowledge that the Organization will not inquire into or consider the criminal convictions of applicants for employment needed to fulfill the terms of any DLBA contract that may result from the competitive procedure in connection with which this affidavit is submitted. As further proof, I have attached either (1) a copy of the Organization's application form to be used in connection with this RFQ or RFP, or (2) a statement on Organization letterhead detailing the Organization's hiring procedure and its compliance with the terms of this section.

[Signatures commence on the following page]

_____[CONTRACTOR]

Dated: _____

By:
Its:

This document was acknowledged, subscribed and sworn before me this ____ day of _____, 201_, by _____, _____, of _____ [CONTRACTOR].

Signature of Notary

Printed name of Notary
Notary Public, State of Michigan, County of: _____
My commission expires: _____
Acting in the County of: _____

Exhibit N
Covenant of Equal Opportunity

Respondents must attach a copy of the following affidavit with original signature from an Authorized Signer of the Organization in blue ink, dated after the release of this RFQ. Please note: the terms of the clearance are enforced after pre-qualification is determined.

**The RFQ # and Duration End Date are provided and do not require modification. The Duration Start Date should reflect the date of execution of this form.*

REVISED 7-12-2012
COVENANT OF EQUAL OPPORTUNITY
(Application for Clearance – Terms Enforced After Contract is Awarded)

I, being a duly authorized representative of _____, (hereinafter "Contractor"), am hereby authorized to enter into a Covenant of Equal Opportunity, (hereinafter "Covenant") with the City of Detroit, ("hereinafter" City); obligating the Contractor and all sub-contractors, not to discriminate against any employee or application for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his/her hire, promotion, job, assignment, tenure, terms, conditions, or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression; except as otherwise exempted under City Code, Ordinance No. 27-2-12.

Contractor will ensure that the City of Detroit Human Rights Department shall receive notification of all potential sub-contractors and a copy of their Covenant prior to the commencement of work on any City of Detroit contract. Contractor further agrees that the City of Detroit reserves the right to require additional information prior to, during, and at any time until after the Covenant is fully executed.

Furthermore, Contractor agrees that this Covenant is valid for the life of the contract and/or for a specified period of time as indicated below and that a breach of this Covenant shall be deemed a material breach of contract and be subject to damages pursuant to City Code, Ordinance No. 27-3-2, Section (e).

RFQ/PO No.: (if applicable) **RFQ #10.29.18**

Duration of Covenant _____ to **December 31st, 2019**

Printed Name of Contractor/Organization _____
(Type or Print Legibly)

Contractor Address _____,
(City) (State) (Zip)

Contractor Phone/E-mail _____/
(Phone) (E-mail)

Printed Name & Title of Authorized Representative _____

Signature of Authorized Representative: _____

Date: _____

This Document MUST be Notarized

Signature of Notary: _____

Printed Name of Seal of Notary: _____

My Commission Expires: ____/____/____

FOR CONTRACTING DEPARTMENT USE ONLY:

Date Rec'd ____/____/____ Received By: _____ Title: _____

Please fax a COPY of the notarized Covenant and Award Letter to the Human Rights Department (313) 224-3434

Exhibit O
Slavery Era Records and Insurance Disclosure

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

CITY OF DETROIT
SLAVERY ERA RECORDS AND INSURANCE DISCLOSURE AFFIDAVIT

1. Name of Contractor: _____

2. Address of Contractor: _____

3. Name of Predecessor Entities (if any): _____

4. Prior Affidavit Submission? ____ No ____ Yes, on: _____

(Date of prior submission)

5. ____ Contractor was established in ____ (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

____ Contractor has searched their records and those of any predecessor entity, and has found no records that they or any predecessor(s) made any investments in, or derived profits from the slave industry or from slave holder insurance policies.

____ Contractor has found records that they or their predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

6. I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge, all documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

____ (Printed Name) _____ (Title)

____ (Signature) _____ (Date)

Subscribed and sworn to before me
this _____ day of _____

Notary Public, _____ County, Michigan
My Commission Expires: _____

Exhibit P
Statement of Political Contributions and Expenditures Affidavit

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

“City Charter § 4-122, ¶ 2: For purposes of conflicts of interest, the City shall require in all of its contractual agreements, including, but not limited to, leases, service and equipment agreements and including contract renewals, that the contractor provide a statement listing all political contributions and expenditures (**“Statement of Political Contributions and Expenditures”**), as defined by the Michigan Campaign Finance Act, MCL 169.201, et seq., made by the contractor, its affiliates, subsidiaries, principals, officers, owners, directors, agents or assigns to elective city officials within the previous four (4) years. Individuals shall also list any contributions or expenditures from their spouses.”

In Column A, enter the name of the person or company that made the contribution or expenditure. If there were no political contributions or expenditures made, enter NONE.

In Column B, enter the relationship of the donor to the contractor or vendor, that is, contractor, affiliate, subsidiary, principal, officer, owner, director, agent, assignee, or spouse of any of the foregoing who are individuals.

In Column C, enter the name of the recipient, an elective city official which under Charter § 3-107, includes only the Mayor, the City Clerk, and members of the City Council and the Board of Police Commissioners.

In Column D, enter the amount of the contribution or expenditure, as defined in the Michigan Campaign Finance Act, 1976 PA 388, MCL 169.204 and MCL 169.206.

In Column E, enter the date of the contribution or expenditure. This statement must include all contributions and expenditures within the previous four years.

[illegible]

STATEMENT OF POLITICAL CONTRIBUTIONS AND EXPENDITURES

Except as set forth above, I certify that no contributions or expenditures were made to elective city officials within the previous four (4) years by the contractor, its affiliates, subsidiaries, principals, officers, owners, directors, agents, assigns, and, if any of the foregoing are individuals, their spouses.

I understand that the information provided in this disclosure will be relied upon by the City of Detroit in evaluating the proposed bid, solicitation, contract, or lease. I swear [or affirm] that the information provided is accurate. If I am signing on behalf of an entity, I swear [or affirm] that I have the authority to provide this disclosure on behalf of the entity.

Sign name: _____

Print name: _____

Sworn and subscribed to before me
on _____, 20____ [by _____, the
_____ of the above named contractor/vendor, an authorized
representative or agent of the contractor/vendor]

Sign: _____

Print: _____

Notary Public, _____ County, Michigan,

Acting in _____ County

My Commission Expires: _____

Exhibit Q

Acceptance of Detroit Land Bank Authority Discipline Policies Acknowledgment Form

Respondents must attach a completed copy of the following Acknowledgment and Acceptance of Discipline Policies Form, with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

**Detroit Land Bank Authority
Acknowledgment and Acceptance of Discipline Policies
Abatement and Demolition**

I have reviewed the Detroit Building Authority's Policy #2016-1 "Policy on Contractor Discipline". I have read the entire contents of these Policies and agree to accept these terms if award an Abatement and Demolition contract.

I understand that I may submit any objections to, in writing, as an attachment to this form. I understand that my company's objections to the standard contract may be considered during the evaluation process for any bid submitted for the Detroit Land Bank Authority's Abatement and Demolition Program.

Sign Name: _____

Print Name: _____

Date: _____

The Detroit Building Authority's Policy #2016-1 "Policy on Contractor Discipline" can be found at the following link:

https://drive.google.com/drive/folders/1c4Lct1RMw3DJtEd4u8pVkJDF8G_ADtsIX

This document was acknowledged, subscribed and sworn before me this _____ day of _____, 201_, by _____, _____, of _____ [CONTRACTOR].

Signature of Notary

Printed name of Notary

Notary Public, State of Michigan, County of: _____

My commission expires: _____

Acting in the County of: _____

Exhibit R
RFQ Submission Affidavit

Respondents must attach a copy of the following affidavit with original signature from an Authorized Agent of the Organization in blue ink, dated after the release of this RFQ.

RFQ SUBMISSION AFFIDAVIT

I, _____, state under oath:

1. I am the _____ of _____ [CONTRACTOR] (hereafter "Organization"), and am authorized to execute this affidavit and contractually bind the Organization.
2. I hereby designate the following individual(s) as the Organization's point of contact for all matters relating to **RFQ #10.29.18**

Primary Contact

Name: _____
Title: _____
Email: _____
Phone: _____

Secondary Contact

Name: _____
Title: _____
Email: _____
Phone: _____

3. I acknowledge that all information submitted to the Detroit Land Bank Authority, in response to this RFQ is true, complete, and correct to the best of my knowledge and belief.
4. I acknowledge that should the Organization discover that any information submitted in response to this RFQ be false, incomplete, or incorrect, the Organization is under a duty and obligation to immediately provide the Detroit Land Bank Authority with the true, complete, and correct information.
5. I acknowledge that the Organization is under an ongoing duty and obligation to renew and/or update and submit to the Detroit Land Bank Authority documents that are subject to expiration (e.g., professional license(s), tax clearance(s)).
6. I further acknowledge that the Organization is under an ongoing duty and obligation to submit additional documents and information as the Detroit Land Bank Authority.

[Signatures commence on the following page]

_____ [CONTRACTOR]

Dated: _____

By: _____

Its: _____

This document was acknowledged, subscribed and sworn before me this ____ day of _____, 201_, by _____, _____ of _____ [CONTRACTOR].

Signature of Notary

Printed name of Notary

Notary Public, State of Michigan, County of: _____

My commission expires: _____

Acting in the County of: _____