**superior court of California, County of orange**

**BIDDER DECLARATION**

**ALL BIDDERS WISHING TO CLAIM THE DVBE INCENTIVE MUST COMPLETE THIS FORM.**

Complete this form only if Bidder wishes to claim the DVBE incentive associated with this solicitation. Please review all instructions prior to completing this form. If Bidder submits incomplete or inaccurate information, it will not receive the DVBE incentive.

**General Instructions**

In this form, (i) “Bidder” refers to a person or entity that submits a response to a competitive solicitation issued by the JBE, including both IFBs and RFPs; and (ii) “bid” refers to a response to a competitive solicitation issued by the JBE, including both IFBs and RFPs.

If Bidder wishes to claim the DVBE incentive in a solicitation where a DVBE incentive is offered, it must complete the Bidder Declaration. If no DVBE incentive is offered, or Bidder does not wish to claim the DVBE incentive, Bidder should not complete the Bidder Declaration.

The JBE will determine whether Bidder is eligible to receive the DVBE incentive based on information provided in the Bidder Declaration. The JBE may, but is not obligated to, verify or seek clarification of any information set forth in the Bidder Declaration. If Bidder submits incomplete or inaccurate information, it will not receive the DVBE incentive.

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| **SECTION I****Instructions for Section I - COMPLETE IF BIDDER IS A DVBE***If Bidder is not a DVBE, skip this section**1. Provide Bidder’s DVBE Supplier ID number, if applicable. This number is in Bidder’s DGS Supplier Profile, accessible at https://www.bidsync.com/DPXBisCASB.**2. Provide the applicable dates. These dates are listed in Bidder’s DGS Supplier Profile, accessible at https://www.bidsync.com/DPXBisCASB.* *3. This percentage is equal to the amount to be paid by Bidder to the non-DVBE subcontractors divided by Bidder’s total bid price, multiplied by 100. Enter a percentage; do not enter a dollar amount. For example, if the amount to be paid by Bidder to non-DVBE subcontractor is $35,000 and Bidder’s total bid price is $125,000, enter “28%” (35000 ÷ 125000 = 0.28; 0.28 x 100 = 28).* *4. The DVBE Declaration is separate from the Bidder Declaration. The Bidder must submit along with the Bidder Declaration a DVBE Declaration completed and signed by the disabled veteran owners and managers of Bidder.**5. Each entity certified as a DVBE by DGS will have received a DVBE certification. Bidder must submit a copy of its DVBE certification.*  |
| 1. DVBE Supplier ID number: Click here to enter text 2. DVBE Certification active from Click here to enter text to Click here to enter text 3. Percentage of the contract work Bidder will subcontract to **non-DVBE** subcontractors: Click here to enter text 4. The disabled veteran owners and managers of Bidder must complete and sign the **DVBE Declaration** (a separate document). Bidder must submit the completed DVBE Declaration along with this Bidder Declaration. 5. Bidder must submit a copy of its DVBE certification along with this Bidder Declaration.  |

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| **SECTION II****Instructions for Section II - COMPLETE IF BIDDER HAS A DVBE BUSINESS UTILIZATION PLAN (BUP)***Please skip this section if (i) Bidder does not have an approved Business Utilization Plan (BUP) on file with DGS, or (ii) this solicitation is for non-IT services.* *1. Provide the date on which DGS approved Bidder’s BUP.* *2. Provide the date through which the BUP is valid.* *3. Bidder must provide a copy of its “Notice of Approved DVBE Business Utilization Plan” issued by DGS. This copy must be provided along with the Bidder Declaration.*  |
| 1. Date BUP was approved by DGS: Click here to enter text 2. Date through which BUP is valid: Click here to enter text 3. Bidder must submit a copy of its “Notice of Approved DVBE Business Utilization Plan” issued by DGS along with this Bidder Declaration.  |

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| **SECTION III****Instructions for Section III - COMPLETE IF BIDDER WILL USE DVBE SUBCONTRACTORS***A DVBE Subcontractor (Subcontractor) is any certified DVBE (whether a person, firm, corporation, or organization) contracting to perform part of Bidder’s contract.* *Enter the total number of Subcontractors Bidder will use for the contract. If the number is zero, skip to Section IV. Otherwise, provide complete information (items 1-13 of Section III) for* ***each*** *Subcontractor.* *1. Provide the full legal name of Subcontractor.**2. Provide the name of a contact person at Subcontractor. The contact person must be able to verify the information provided in the Bidder Declaration regarding that Subcontractor.* *3. Provide the full address of Subcontractor.**4. Provide Subcontractor’s phone number, including area code.* *5. Provide Subcontractor’s email address. If Subcontractor does not have an email address, insert “N/A.”* *6. Provide Subcontractor’s DVBE Supplier ID number. This number is in Subcontractor’s DGS Supplier Profile, accessible at https://www.bidsync.com/DPXBisCASB.**7. Provide the applicable dates. These dates are in Subcontractor’s DGS Supplier Profile, accessible at https://www.bidsync.com/DPXBisCASB.**8. Each entity certified as a DVBE by DGS will have received a DVBE certification. Bidder must submit a copy of each Subcontractor’s DVBE certification. Provide a copy of Subcontractor’s DVBE certification.**9. Provide a detailed description of the goods and/or services Subcontractor will provide for the contract.* *10. Provide an explanation of how Subcontractor’s goods and/or services constitute a “commercially useful function” for purposes of the contract. Pursuant to Military and Veterans Code section 999, a person or an entity is deemed to perform a “commercially useful function” if a person or entity does all of the following: (i) is responsible for the execution of a distinct element of the work of the contract; (ii) carries out the obligation by actually performing, managing, or supervising the work involved; (iii) performs work that is normal for its business services and functions; (iv) is responsible, with respect to products, inventories, materials, and supplies required for the contract, for negotiating price, determining quality and quantity, ordering, installing, if applicable, and making payment; and (v) is not further subcontracting a portion of the work that is greater than that expected to be subcontracted by normal industry practices. Note: a person or entity will not be considered to perform a “commercially useful function” if its role is limited to that of an extra participant in a transaction, contract, or project through which funds are passed in order to obtain the appearance of DVBE participation.**11. This percentage is equal to the amount to be paid by Bidder to Subcontractor divided by Bidder’s total bid price, multiplied by 100. Enter a percentage; do not enter a dollar amount. For example, if the amount to be paid by Bidder to Subcontractor is $6,600 and Bidder’s total bid price is $75,000, enter “8.8%” (6600 ÷ 75000 = 0.088; 0.088 x 100 = 8.8).* *12. The Bidder must submit a written confirmation from the Subcontractor, indicating that Subcontractor will provide the required goods and/or services if Bidder is awarded the contract.**13. The DVBE Declaration is a separate form from the Bidder Declaration. The Bidder must submit along with the Bidder Declaration a DVBE Declaration completed and signed by the disabled veteran owners and managers of the Subcontractor.*  |
| Enter the total number of DVBE subcontractors (Subcontractors) that Bidder will use for this contract: Click here to enter text *If the total number of DVBE Subcontractors Bidder will use is zero, skip this section.* Provide the following information or materials for **each** DVBE Subcontractor Bidder will use for this contract. Attach additional sheets if necessary.1. Subcontractor name: Click here to enter text 2. Subcontractor contact person: Click here to enter text 3. Subcontractor address: Click here to enter text 4. Subcontractor phone number: Click here to enter text 5. Subcontractor email: Click here to enter text 6. Subcontractor DVBE Supplier ID number: Click here to enter text 7. Subcontractor DVBE Certification active from Click here to enter text to Click here to enter text 8. Bidder must submit a copy of Subcontractor’s DVBE certification along with this Bidder Declaration.9. Describe the goods and/or services to be provided by Subcontractor in connection with the contract: Click here to enter text 10. Explain how Subcontractor is performing a “commercially useful function” for purposes of this contract. (Please see the instructions for the definition of “commercially useful function.”) Click here to enter text 11. Enter the percentage of the total bid price for the goods and/or services to be provided by Subcontractor: Click here to enter text%12. Provide written confirmation from Subcontractor that it will provide the goods and/or services identified above if Bidder is awarded the contract.13. The disabled veteran owners and managers of Subcontractor must complete and sign the **DVBE Declaration** (a separate document). Bidder must submit the completed DVBE Declaration along with this Bidder Declaration. |

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| **SECTION IV****Instructions for Section IV – CERTIFICATION***Provide Bidder’s full legal name, and federal ID number, address, and telephone number in the appropriate boxes. The certification must be signed by an authorized Bidder representative in the box labeled “By (Authorized Signature).” Provide the name and title of the authorized Bidder representative, and the date, county and state where that person signed the certification, in the appropriate boxes.*  |
| I, the official named below, certify that the information provided in this form is true and correct. I am duly authorized to legally bind the Bidder to this certification. This certification is made under the laws of the State of California.

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| *Company Name (Printed)*Click here to enter text  | *Tax ID Number*Click here to enter text |
| *Address*Click here to enter text | *Telephone Number*Click here to enter text |
| *By (Authorized Signature)* |
| *Printed Name and Title of Person Signing*Click here to enter text |
| *Date Executed*Click here to enter text | *Executed in the County of* Click here to enter text *in the State of* Click here to enter text |

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**superior court of California, County of orange**

**DVBE DECLARATION**

**EACH DVBE ELIGIBLE BUSINESS, INCLUDING DVBE SUBCONTRACTORS MUST COMPLETE THIS FORM.**

**General Instructions**

In this form, (i) “Bidder” refers to a person or entity that submits a response to a competitive solicitation issued by the JBE, including both IFBs and RFPs; and (ii) “bid” refers to a response to a competitive solicitation issued by the JBE, including both IFBs and RFPs.

If Bidder wishes to claim the DVBE incentive in a solicitation where a DVBE incentive is offered, it must submit a DVBE Declaration completed by each DVBE that will provide goods and/or services in connection with its bid. If Bidder is itself a DVBE, it must complete the DVBE Declaration itself. If Bidder will use one or more DVBE subcontractors, each DVBE subcontractor must complete a DVBE Declaration.

If no DVBE incentive is offered, or Bidder does not wish to claim the DVBE incentive, Bidder should not submit a DVBE Declaration. In addition, if Bidder wishes to claim the DVBE incentive using a DVBE Business Utilization Plan (BUP) on file with DGS, Bidder should not submit a DVBE Declaration. Note that a BUP cannot be used to qualify for the DVBE incentive in a non-IT services solicitation.

The JBE will determine whether Bidder is eligible to receive the DVBE incentive based on information provided in the DVBE Declaration. The JBE may, but is not obligated to, verify or seek clarification of any information set forth in the DVBE Declaration. If Bidder submits incomplete or inaccurate information, it will not receive the DVBE incentive.

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| **SECTION I*****Instructions for Section 1****Provide the full legal name of the DVBE, and the DVBE’s Supplier ID number. This number is in the DVBE’s DGS Supplier Profile, accessible at https://www.bidsync.com/DPXBisCASB.* |
| **SECTION 1. MUST BE COMPLETED BY ALL DVBEs** Disabled Veteran Business Enterprise (DVBE) name: Click here to enter text DVBE Supplier ID number: Click here to enter text  |

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| **SECTION II*****Instructions for Section 2****Check only one box. If the DVBE is not a broker or agent, check the first box. If the DVBE is a broker or agent, check the second box and provide the name, address, and phone number of the principal for which the DVBE is an agent or broker. Military and Veterans Code section 999.2(b) defines “broker” or “agent” as an individual or entity that does not have title, possession, control, and risk of loss of materials, supplies, services, or equipment provided to [a JBE], unless one or more of the disabled veteran owners has at least 51-percent ownership of the quantity and value of the materials, supplies, services, and of each piece of equipment provided under the contract.* *All disabled veteran owners and managers of the DVBE must sign and date Section 2. If there are insufficient signature blocks for all disabled veteran owners and managers to sign, attach additional sheets.*  |
| **SECTION 2. MUST BE COMPLETED BY ALL DVBEs** Check only one box in Section 2 and provide original signatures of all disabled veteran (DV) owners and managers of the DVBE. **[ ]**  I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code (MVC) section 999.2(b), of the goods and/or services provided by the DVBE in connection with the solicitation identified above. **[ ]**  Pursuant to MVC 999.2(f), I (we) declare that the DVBE is a broker or agent for the following principal. *(attach additional sheets if more than one principal)* Principal Name: Click here to enter text Principal Phone: Click here to enter text  Principal Address: Click here to enter text **Disabled veteran owners and managers of the DVBE:** *(attach additional sheets if necessary)*

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| *Printed Name of DV owner/manager*Click here to enter text | *Date signed*Click here to enter text |
| *Signature of DV owner/manager* |

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| *Printed Name of DV owner/manager*Click here to enter text | *Date signed*Click here to enter text |
| *Signature of DV owner/manager* |

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| --- | --- |
| *Printed Name of DV owner/manager*Click here to enter text | *Date signed*Click here to enter text |
| *Signature of DV owner/manager* |

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| **SECTION III*****Instructions for Section 3****The DVBE must complete Section 3 only if both of the following are true (i) the DVBE will provide rental equipment in connection with the contract, and (ii) the DVBE checked the first box in Section 2, indicating that it is not a broker or agent.* *If (i) the DVBE will not provide rental equipment in connection with the contract, or (ii) the DVBE checked the second box in Section 2, indicating that it is a broker or agent, the DVBE should not check a box in Section 3 or provide the signatures in Section 3.**Check each box in Section 3 if the corresponding statements are true.**All disabled veteran owners of the DVBE must sign and date Section 3, in the signature blocks designated for disabled veteran owners. Each disabled veteran owner of the DVBE must also provide his or her tax ID number, address, and telephone number in the signature block. If there are insufficient signature blocks for all disabled veteran owners, attach additional sheets.**All disabled veteran managers of the DVBE must sign and date Section 3, in the signature blocks designated for disabled veteran managers. If there are insufficient signature blocks for all disabled veteran managers, attach additional sheets.* |
| **MUST BE COMPLETED BY DVBEs THAT PROVIDE RENTAL EQUIPMENT AND ARE NOT BROKERS/AGENTS***Skip this section if (i) the DVBE is not providing rental equipment or (ii) the DVBE indicated in Section 2 that it is a broker or agent.*Check applicable boxes in Section 3 and provide original signatures of all DV owners and managers of the DVBE. **[ ]**  Pursuant to MVC 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with MVC 999 et seq. **[ ]**  The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented in connection with this solicitation. I (we), the DV owner(s) of the equipment, have submitted to DGS my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in MVC 999.2 (c) and (g). **Disabled veteran owners of the DVBE:** *(attach additional sheets if necessary)*

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| *Printed Name of DV owner*Click here to enter text | *Tax ID Number of DV owner*Click here to enter text |
| *Address of DV owner*Click here to enter text | *DV owner Telephone Number* Click here to enter text |
| *Signature of DV owner* | *Date signed*Click here to enter text |

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| *Printed Name of DV owner*Click here to enter text | *Tax ID Number of DV owner*Click here to enter text |
| *Address of DV owner*Click here to enter text | *DV owner Telephone Number* Click here to enter text |
| *Signature of DV owner* | *Date signed*Click here to enter text |

**Disabled veteran managers of the DVBE:** *(attach additional sheets if necessary)*

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| *Printed Name of DV manager*Click here to enter text | *Date signed*Click here to enter text |
| *Signature of DV manager* |

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| *Printed Name of DV manager*Click here to enter text | *Date signed*Click here to enter text |
| *Signature of DV manager* |

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