Revised Schedule D - Summary Questionnaire

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| --- | --- | --- | --- |
| 1. Can your company **commence on or before July 1, 2013 and be completed by June 31, 2014**? |  | **YES**  \_\_\_\_\_\_\_ | **ALTERNATIVE**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2. Does your company agree to provide a minimum of **3 references** to the University **upon request**, with specific contact names and phone numbers? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 3. Did you attend **the mandatory Pre-Proposal** meeting **on May 9, 2013?** |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 4. Did your company provide a certificate of insurance to meet or exceed all our minimum requirements? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 5. Did your company provide the required Proposal Certification, Non- Collusion Affidavit and Vendor Acknowledgement**, Schedule A?** |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 6. Did your company complete and provide the Summary **Price Schedule C**, and submit it electronically to **rfp@wayne.edu?** |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 7. Does your company agree to enroll in our ACH payment program? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 8. Did your company agree to guarantee to maintain a top priority for the UNIVERSITY? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 9. Please complete the following questions:  Total number of employees in your company  Total years in business with this company name |  | **\_\_\_\_\_\_**  **\_\_\_\_\_\_** |  |
| 10. Does your company agree to provide financial reports to the University **upon request?** |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. Does your company agree to allow the UNIVERSITY to audit your books pertaining to the UNIVERSITY account? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. Are there any conflicts of interest in doing business with the University? |  | **\_\_\_ Yes**  **\_\_\_ No** |  |
| 13. Did your company provide a “Restricted Services” exhibit, EXHIBIT 1? |  | **\_\_\_ Yes**  **\_\_\_ No** |  |
| 14. Does your company agree to provide a list of **lost accounts** in excess **of $25,000?** |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. Did your company quote services at **prevailing wage rates** where applicable and clearly indicate such in your proposal? |  | **\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

1. **ADDENDA:** The undersigned affirms that the cost of all work covered by the following Addenda are included in the lump sum price of this proposal.

Addendum No. Date Addendum No. Date

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Addendum No. Date Addendum No. Date

Addendum No. Date Addendum No. Date

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Typed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(Title) (Date)