



# STATE OF ARKANSAS

## OFFICE OF STATE PROCUREMENT

1509 West 7th Street, Room 300  
Little Rock, Arkansas 72201-4222

# ***RESPONSE PACKET***

## ***DCFS-18-1001***

### **CAUTION TO VENDOR**

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification.



# STATE OF ARKANSAS

Department of Human Services  
Office of Procurement

for

Division of Children and Family Services

700 Main Street,  
Little Rock, Arkansas 72203

## RESPONSE SIGNATURE PAGE

Type or Print the following information.

RESPONDENT'S INFORMATION			
Company:			
Address:			
City:	State:	Zip Code:	
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit		
Minority Designation: <i>See Minority Business Policy</i>	<input type="checkbox"/> Not Applicable <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American <input type="checkbox"/> Service Disabled Veteran		
	AR Minority Certification #: _____		Service Disabled Veteran Certification #: _____

VENDOR CONTACT INFORMATION	
<i>Provide contact information to be used for bid solicitation related matters.</i>	
Contact Person:	Title:
Phone:	Alternate Phone:
Email:	

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.  <i>Note: If a redacted copy of the submission documents is not provided with vendor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), <b>shall</b> be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

**An official authorized to bind the vendor to a resultant contract must sign below.**

The signature below signifies agreement that either of the following shall cause the vendor's response to be disqualified:

- Additional terms or conditions submitted in their response, whether submitted intentionally or inadvertently.
- Any exception that conflicts with a Requirement of this *Bid Solicitation*.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
*Use Ink Only.*

Printed/Typed Name: \_\_\_\_\_ Date: \_\_\_\_\_

## **SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE**

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

**Authorized Signature:** \_\_\_\_\_  
*Use Ink Only.*

**Printed/Typed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## **SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE**

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

**Authorized Signature:** \_\_\_\_\_  
*Use Ink Only.*

**Printed/Typed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**SECTIONS 3, 4, 5 - VENDOR AGREEMENT AND COMPLIANCE**

- *Exceptions to Requirements **shall** cause the vendor's response to be disqualified.*

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

**Authorized Signature:** \_\_\_\_\_

*Use Ink Only.*

**Printed/Typed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PROPOSED SUBCONTRACTORS FORM

- Do not include additional information relating to subcontractors on this form or as an attachment to this form.

VENDOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

☐ VENDOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Authorized Signature: \_\_\_\_\_  
Use Ink Only.

Printed/Typed Name: \_\_\_\_\_ Date: \_\_\_\_\_

## **INFORMATION FOR EVALUATION**

- *Provide a response to each item/question in this section. Check boxes are to verify that requested information is being submitted in response packet.*
- ***Do not** include additional information if not pertinent to the itemized request.*

### **E.1 SUBMISSION CHECKLIST**

- ☐ Business entity paperwork from Arkansas Secretary of State Office
- ☐ Child Welfare Agency license
- ☐ Proof of any other certification required under the Minimum Licensing Standards for Child Welfare Agencies.
- ☐ Detail background description of organization
- ☐ Detail description of similar projects
- ☐ Resumes and credentials of those to work under the contract
- ☐ Three letters of recommendation and three letters of recommendation for subcontractor(s) if applicable
- ☐ *Equal Employment Opportunity Policy*
- ☐ EO 98-04 Disclosure Form – *Contract Grant and Disclosure Form*

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