**Division 6**

**Acknowledgments and Duly Authorized Signature**

**QBS SUBMITTAL BOOKLET ACKNOWLEDGEMENTS:**

I understand that failure to **properly complete, sign, date, and upload** the QBS Submittal Booklet to the specific Request for Qualifications for this Contract in BizNet in its entirety and IN THE SPECIFIED FORMAT ***prior*** to the due date and time of this QBS Submittal Booklet ***may*** result in the firm’s submittal being deemed deficient. If deemed deficient, I understand that the firm ***will not*** be allowed to pursue this specific Contract.

**NOTICES OF CERTIFICATIONS AND REPRESENTATIONS:**

I understand that failure to **properly complete, sign, date, and upload** all of the required Certifications and Representations withthis QBS Submittal Booklet ***may*** result in the firm’s submittal being deemed deficient. If deemed deficient, I understand that the firm ***will not*** be allowed to pursue this specific Contract. Violations of certain Certifications and Representations (including, but not limited to, CGS §9-612(f)(2)(A)) ***may*** result in disqualification from entering into a State of Connecticut contract.

**CONDITIONAL SELECTION ACKNOWLEDGEMENTS:**

I understand that failure of a **conditionally selected** firm to **properly complete, sign, date, and submit** all of the required Professional Documents, Business Credentials, and Insurance Verification to the DAS Office of Legal Affairs, Policy, and Procurement for review and approval within the ***fourteen (14) calendar day*** deadline **after being notified via email of their conditional selection *may*** result in the firm’s submittal being deemed deficient. If deemed deficient, I understand that DAS/CS ***shall*** then initiate negotiations with the next highest-rated firm.

**DIVISION 1 ACKNOWLEDGEMENTS:**

I understand that failure to attach my Firm’s ***Letter of Interest and Narrative of Firm’s Approach to the Work for this Project*** behind Division 1 ***may*** result in the firm’s submittal being deemed deficient. If deemed deficient, I understand that the firm ***will not*** be allowed to pursue this specific Contract.

**DIVISION 2 ACKNOWLEDGEMENTS:**

I understand that failure to attach my Firm’s ***Additional Criteria Considerations*** behind Division 2 ***may*** result in the firm’s submittal being deemed deficient. If deemed deficient, I understand that the firm ***will not*** be allowed to pursue this specific Contract.

**DIVISIONS 4 and 5 ACKNOWLEDGEMENTS:**

I understand that by signing below, I attest that the information provided is current and factual, and that all Firms on the proposed Team agree to work on the Project. If, prior to the Contract being signed, there are changes in the proposed Team, I understand that the state reserves the right to cancel the Conditional Selection. I understand that failure to submit the qualifications and/or resume(s) material noted in Divisions 4 and 5 ***may*** result in my firm’s QBS Submittal Booklet being deemed deficient. I also understand that **if applicable**, failure to attach my Firm’s **Certification of Legal Existence** behind **Attachment A of Division 4** ***may*** result in the firm’s submittal being deemed deficient**.** If deemed deficient, I understand that my firm ***will not*** be allowed to pursue this specific Contract.

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| **Digital Signature of Duly Authorized Representative** |
| **IMPORTANT: The individual submitting this form must be authorized to sign contracts on behalf of the company, and must be listed as such in the company’s corporate resolution/vendor authorization documents. Please keep in mind that the person listed as “authorized” must be the same person submitting their electronic signature when completing their company‘s submittal.**An Authorized Representative of the Prime Firm or of a Joint Venture must digitally sign and date the completed QBS Submittal Booklet. Signing attests that the information provided is current, factual, and true to the best of your knowledge and belief, subject to the penalties of false statement, that you understand and accept the Division 6 Acknowledgments listed above, and that all Firms on the proposed Team agree to work on the Project. |
| **Name of Authorized Representative:** | Click here to enter text. |
| **Title of Authorized Representative:** | Click here to enter text. |
| **Signature of Authorized Representative:** |  |
| **Date Signed:** | Click here to enter text. |