

EXHIBIT D: FIRM BACKGROUND INFORMATION

Please complete the following questionnaire and certification and attach to the business proposal. Respondents proposing the use of subcontractors must also submit the same form completed by the principal of any subcontracting firm.

C1 SECTION ONE - GENERAL QUESTIONS

The following questions relate to previous findings of false claims, misrepresentations, or other crimes committed by principles or others which would be assigned to work under a resulting Agreement. If any of these questions are answered in the affirmative, attach a letter of explanation regarding each case.

- C1.1** Has your firm or any predecessor to your firm, or any of its owners, officers, partners, or others which would be assigned to work under a resulting Agreement ever been found liable in a civil suit, or found guilty in a criminal action, for making any false claim or material misrepresentation to any public agency or entity? Yes No
- C1.2** Has your firm or any predecessor to your firm, or any of its owners, officers, partners, or others which would be assigned to work under a resulting Agreement ever been convicted of a crime involving any federal, state, or local law related to the consulting services your firm provides? Yes No
- C1.3** Has your firm or any predecessor to your firm, or any of its owners, officers, partners, or others which would be assigned to work under a resulting Agreement ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty? Yes No
- C1.4** Is your firm currently the debtor in a bankruptcy case, or has your firm, or any predecessor to your firm, been involved in any bankruptcy action at any time during the last five (5) years? Yes No
- C1.5** In the last ten (10) years, has your firm or any predecessor to your firm, been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible consultant? Yes No
- C1.6** Within the last ten (10) years, has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance? Yes No

C2 SECTION TWO - CLAIMS AND LITIGATION

The following questions relate to litigation involving the firm or persons who would be assigned to work under a resulting Agreement. If any questions are answered in the affirmative, attach a letter of explanation regarding each case.

- C2.1** Have any lawsuits or administrative, legal, arbitration or other proceedings been brought or commenced against your organization or any of its principals, officers, equity owners, or others which would be assigned to work under a resulting Agreement within the last ten (10) years in connection with any project or scope of work similar to that proposed in this RFP? If so, describe the relief demanded and the disposition of each Yes No

lawsuit or other proceeding.

- C2.2** Has your organization ever filed a lawsuit or commenced other administrative, legal, or other proceedings within the last ten (10) years in connection with any project or scope of work similar to that proposed in this RFP? If so, describe the relief demanded and the disposition of each lawsuit or other proceeding. Yes No
- C2.3** Are there any judgments, orders, decrees or arbitration awards that are currently pending and outstanding against your organization or any of the officers, directors, employees or principals of your organization? If so, describe each such judgment, order, decree or arbitration award and the present status of the satisfaction or discharge thereof. Yes No
- C2.4** Has your organization ever refused to sign a contract for a project or scope of work similar to that proposed in this RFP? If so, on a separate attachment, state the following: (i) a description of each such contract; (ii) the other party's name, address, telephone number and contact person; and (iii) the circumstances of your refusal to sign such contract. Yes No
- C2.5** Has your organization ever failed to complete a project or scope of work similar to that proposed in this RFP? If so, on a separate attachment, state the following: (i) a description of each such contract; (ii) the other party's name, address, telephone number and contact person; and (iii) the circumstances of your refusal to sign such contract. Yes No
- C2.6** Has your organization ever been declared in default of a project or scope of work similar to that proposed in this RFP? If so, on a separate attachment, state the following: (i) a description of each such contract; (ii) the other party's name, address, telephone number and contact person; and (iii) the circumstances of your refusal to sign such contract. Yes No
- C2.7** Has any contract for a project or scope of work similar to that proposed in this RFP to which your organization is a party been terminated for the convenience of the owner? If so, identify the project and project owner along with a description of the circumstances under which the convenience termination occurred. Yes No

C3 SECTION THREE

MINORITY, VETERAN AND WOMEN'S BUSINESS ENTERPRISE PARTICIPATION

The following questions relate to the firm's status as a minority or women's owned business and status in the state of Indiana.

- C3.1** Are you a minority, woman or veteran owned business enterprise firm, if so, which one? Yes No

If yes, please indicate type below.

Women Small Business Enterprise (SBE) Minority Veteran

C3.2 Are you certified by the state of Indiana as a minority business enterprise firm? Yes
 No

C3.3 If you are not a minority business enterprise firm, is there any minority business enterprise participation in this project through subcontractors or suppliers? Yes
 No

C3.4 If there is minority business enterprise participation in this project through subcontractors or suppliers, what percentage of the total amount is being accomplished by minority or women's business enterprises? _____%

C4 **SECTION FOUR – CERTIFICATION**

I, the undersigned, certify and declare that I have read all the foregoing answers to the questions in this exhibit. The matters stated in the questionnaire answers are true of my own knowledge and belief, except as to those matters stated on information and belief, and as to those matters I believe them to be true. I declare under penalty of perjury under the laws of the State of Indiana, that the foregoing is correct.

I, the undersigned, certify and declare that I am duly authorized and have the legal authority to bind the Respondent on whose behalf I am signing.

Name of Firm

Date

Printed Name

Signature