

# **OFFER**

(please complete, sign, and return with the submittal)

-	gned hereby offers and agrees to furnish the material is, conditions, specifications, and addenda issued as
Arizona Sales Tax No. Use Tax No. for Out-of-State Suppliers City of Phoenix Sales Tax No. Arizona Corporation Commission File No.	
provide its federal taxpayer identification number the City of Phoenix for the purposes of report by the City of Phoenix under the awarded contains the contains and the contains the contains and the contains the c	ommended for contract award, Offeror agrees to mber or as applicable its social security number to rting to appropriate taxing authorities, monies paid ontract. If the Offeror provides its social security with appropriate state and federal officials. This 6041A.
Enter City's Registration System ID Nun Located at City's eProcurement website (se - INSTRUCTIONS - CITY'S REGISTRATION	ee SECTION 2
attachments and any referenced documents	and faithfully comply with this solicitation, its s. Offeror certifies that the prices offered were on with any other Offeror or potential Offerors.
Authorized Signature	Date
Print Name and Title (President, Manager, Member)	Offeror Legal Name and Company Type (LLC, Inc., Sole Proprietor)
Street Address: City, State, Zip Code: Telephone Number: Email Address:	



#### **ACCEPTANCE OF OFFER**

The Offer is hereby accepted. The Contractor is now bound to sell the material(s) or service(s) listed by the attached contract and based upon the solicitation, including all terms, conditions, specifications, amendments, etc. and the Contractor's Offer as accepted by the City. This contract shall henceforth be referred to as Contract No. \_\_\_\_\_. The Contractor has been cautioned not to commence any billable work or provide any material or service under this contract until Contractor receives purchase order, or contract documentation. **CITY OF PHOENIX** A Municipal Corporation Jeffrey Barton, City Manager Director or delegate: Title: Department: Attest: this \_\_\_\_\_day of \_\_\_\_\_ 2024 City Clerk

Approved as to form this 19th day of January 2017. This document has been approved as to form by the City Attorney and is on file with the City Clerk. It need not be submitted to the City Attorney for approval unless the form document is altered.



#### **CONFLICT OF INTEREST AND TRANSPARENCY FORM**

(please complete, sign, and return with the submittal)

This form must be signed and submi your Offer may be considered non-re		City and all	questions must be answered (or N/A) or
1. Name of person submitting this of	disclosure f	form.	
First	MI	Last	Suffix
Contract Information			
Solicitation # or Name:			
<ol><li>Name of individual(s) or entity(ie</li></ol>	s) seeking	a contract v	vith the City (i.e. parties to the Contract)
or subsidiaries of the individual of	r entity list	ed in Quest	rtners, parent, sublessees, joint venture, ion 3. Please include all Board members, itry. If not applicable, indicate N/A.
5. List any individuals or entities that	at will be su	ubcontractor	rs on this contract or indicate N/A.
□ Subcontractors may be retai □ List of subcontracts, includin			of the time of this submission. er(s) and business name:
6. List any attorney, lobbyist, or cor to assist in the proposal or seeki			y individuals listed in Questions 3, 4, or 5
to assist in the proposal of seeki	ng the lest	uning contra	ct. II none, indicate N/A.



#### **Disclosure of Conflict of Interest:**

#### A. City Code Section 43-34

Are you aware of any fact(s) with regard to this solicitation or resulting contract that would
raise a "conflict of interest" issue under City Code Section 43-34?
"An elected City official or a City employee shall not represent any person or business for
compensation before the City regarding any part of a procurement, including any resulting
contract, if during the time the elected official is or was in office or the employee is or was
employed by the City such elected official or employee played a material or significant role in
the development of the solicitation, any other part of the procurement, or the contract award."

I am not aware of any conflict(s) of interest under City Code Section 43-34.
I am aware of the following potential or actual conflict(s) of interest:

#### B. ARS Sections 38-501 et. Seq. & City Charter Chapter 11

State law and the Phoenix City Charter and Code prohibit public officers or employees, their close relatives, and any businesses they, or their relatives, own from (1) representing before the City any person or business for compensation, (2) doing business with the City by any means other than through a formal procurement, and (3) doing business with the City without disclosing that the person has an interest in the contract. This prohibition extends to subcontracts on City contracts and also applies to parent, subsidiary, or partner businesses owned by a public officer or employee. See A.R.S. Sections 38-501 through 38-511, for more information (City Charter, Chapter 11, applies the state conflict-of-interest law to City employees).

Please note that any contract in place at the time a person becomes a public officer or employee may remain in effect. But the contract may not be amended, extended, modified, or changed in any manner during the officer's or employee's city service without following city administrative regulations.

Are you aware of any fact(s) with regard to this contract that would raise a "conflict of interest" issue under A.R.S. Sections 38-501 through 38-511 (See Arizona Revised St

tere	st issue under A.R.S. Sections 36-301 tillough 36-311 (See Alizona Revised
tatut	tes regarding conflict of interest at <u>www.azleg.gov</u> ).
	I am not aware of any conflict(s) of interest under Arizona Revised Statutes Sections
	38-501 through 38-511.
	I am aware of the following conflict(s) of interest:

Invitation For Bid #IFB 24-FSD-034 Title: Medium & Heavy Duty Cab and Chassis



8. Acknow	wledgements
A. <b>Solicitat</b>	tion Transparency Policy – No Contact with City Officials or Staff During Evaluation
per	nderstand that a person or entity who seeks or applies for a city contract, or any other son acting on behalf of that person or entity, is prohibited from contacting city officials and ployees regarding the contract after a solicitation has been posted.
me acc out	s "no-contact" provision only concludes when the contract is awarded at a City Council eting. If contact is required with City official or employees, the contact will take place in cordance with procedures by the City. Violation of this prohibited contacts provision, set in City Code Sections 2-190.4 and 43-36, by respondents, or their agents, will lead to qualification.
B. <b>Fraud P</b> ı	revention and Reporting Policy
ser	cknowledge that the City has a fraud prevention and reporting policy and takes fraud riously. I will report fraud, suspicion of fraud, or any other inappropriate action to: ephone no. 602-261-8999 or 602-534-5500 (TDD); or <a href="mailto:aud.integrity.line@phoenix.gov">aud.integrity.line@phoenix.gov</a> .
way for ou	se of the fraud policy is to maintain the City's high ethical standards. The policy includes a r business partners to report wrongdoing or bad behavior. Suspected fraud should be nmediately to the Phoenix Integrity Line. The City has adopted a zero-tolerance policy fraud.
	OATH
knowledge Should any particularly	t the statements contained in this form, including any attachments, to the best of my and belief are true, correct, and complete.  y of the answers to the above questions change during the course of the contract, as it relates to any changes in ownership, applicant agrees to update this form with the nation within 30 days of such changes. Failure to do so may be deemed a breach of
PRINT NA	ME TITLE
SIGNATU	RE DATE
COMPANY	(CORPORATION, LLC, ETC.) NAME and DBA



# **COSTS AND PAYMENTS**

(please complete and return with the submittal)

PAYMENT TERMS & OPTIONS: Vendors must choose an option, if a box is not checked, the City will default to 0% - net 45 days:
Contractor offers a prompt payment discount of either% - 30 days or 0% – 45 days - to apply after receipt of invoice or final acceptance of the products (invoice approval), whichever date is later, starts the 30 days. If no prompt payment discount is offered, the default is 0%, net 45 days; effective after receipt of invoice or final acceptance of the products, whichever is later. Payment terms offering a discount will not be considered in the price evaluation of your offer.
Contractor may be paid immediately upon invoice approval, if enrollment is made to the Single Use Account (SUA) Program, administered by the City's servicing bank ("Bank"). By checking this box, the vendor accepts transaction costs charged by their merchant bank and agrees not to transfer to the City those extra charges. The City will not pay an increase in our services for the SUA charges; if an audit uncovers an upcharge for the SUA charges the vendo will owe the City all costs. The vendor may opt-out of the SUA program once, but then may not rejoin during the same contract term. For more information about the SUA program or to enroll, send email to mailbox.sua@phoenix.gov.



# **PLACE OF BUSINESS**

(please complete and return with the submittal)

	business may an award factor in order to minimize the City's trets. List all service locations are available:	ansportation
-		
-		
-		
- -		
-		
-		
-		

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# WARRANTY

(please complete and return with the submittal)

Specify the Contractor or dealership / manufacturer where warranty work will be done:		
Contractor		
Address		
City, State, Zip Code		

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**Email** 

1. NOTICES AND CONTACTS: Any notice, consent, or other communication required or permitted under this Agreement shall be in writing and either delivered in person, sent by facsimile transmission, sent by email, deposited in the United States Mail, postage prepaid, registered or certified mail, return receipt requested, or deposited with any commercial air courier or express service addressed as follows:

# **GENERAL COMMUNICATION INTENDED FOR PROPOSER:** Organization Name Attn Address City, State and Zip Code Telephone Fax **Email** WITH A REQUIRED COPY TO: **Organization Name** Attn Address City, State and Zip Code Telephone Fax **Email** ACCOUNTS RECEIVABLE CONTACT: If different than above. Name Address City, State and Zip Code Telephone

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OPERATIONS CONTACT: If different than above.
Name
Address
City, State and Zip Code
Telephone
Email
INSURANCE CONTACT: If different than above.
Name
Address
City, State and Zip Code
Telephone
Email
EMERGENCY 24-HOUR SERVICE CONTACT: If different than above.
Name
Address
City, State and Zip Code
Telephone
Email