

# CONFLICT OF INTEREST AND TRANSPARENCY FORM

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

This form must be signed and submitted to the City and all questions must be answered (or N/A) or your Offer may be considered non-responsive.				
1.	Name of person submitting this dis	closure f	orm.	
		MI	Last	Suffix
2.	Contract Information			
So	olicitation # or Name:			
3.	Name of individual(s) or entity(ies)	seeking	a contract with	n the City (i.e. parties to the Contract)
4.		entity liste	ed in Question	ers, parent, sublessees, joint venture, a 3. Please include all Board members, r. If not applicable, indicate N/A.
5.	List any individuals or entities that	will be su	bcontractors of	on this contract or indicate N/A.
	☐ Subcontractors may be retaine☐ List of subcontracts, including t			
6.	List any attorney, lobbyist, or const to assist in the proposal or seeking			ndividuals listed in Questions 3, 4, or 5
	to assist in the proposal of seeking	, are resu	iming contract.	ii none, maioate n/A.



#### 7. 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 Statutes regarding conflict of interest at <a href="https://www.azleg.gov">www.azleg.gov</a>).

Sections



8.	Acl	knowledgements
A.Solicitation Transparency Policy – No Contact with City Officials or Staff During Evaluation		
		I understand that a person or entity who seeks or applies for a city contract, or any other person acting on behalf of that person or entity, is prohibited from contacting city officials and employees regarding the contract after a solicitation has been posted.
		This "no-contact" provision only concludes when the contract is awarded at a City Council meeting. If contact is required with City official or employees, the contact will take place in accordance with procedures by the City. Violation of this prohibited contacts provision, set out in City Code Sections 2-190.4 and 43-36, by respondents, or their agents, will lead to <b>disqualification.</b>
В. <b>F</b>	rau	d Prevention and Reporting Policy
		I acknowledge that the City has a fraud prevention and reporting policy and takes fraud seriously. I will report fraud, suspicion of fraud, or any other inappropriate action to: telephone 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 rep	fo orte	rpose of the fraud policy is to maintain the City's high ethical standards. The policy includes a rour business partners to report wrongdoing or bad behavior. Suspected fraud should be d immediately to the Phoenix Integrity Line. The City has adopted a zero-tolerance policying fraud.
		OATH
		OAIII
I affirm that the statements contained in this form, including any attachments, to the best of my knowledge and belief are true, correct, and complete.  Should any of the answers to the above questions change during the course of the contract, particularly as it relates to any changes in ownership, applicant agrees to update this form with the new information within 30 days of such changes. Failure to do so may be deemed a breach of contract.		
PR	INT	NAME TITLE
SIG	NA	TURE DATE
СО	MP	ANY (CORPORATION, LLC, ETC.) NAME and DBA



### **CONTRACTOR LICENSING REQUIREMENTS**

(please complete and return with the submittal)

Offeror shall comply with all statutes and rules of the State of Arizona and the Registrar of Contractors. In accordance with A.R.S. § 32-1151, and unless otherwise exempted by A.R.S. § 32-1121, Offeror shall have the correct class of license as required by the Registrar of Contractors for the work specified, at the time of offer submission.

Offeror certifies possession of the following license:

Licensed Contractor's Name	
Class	
License Number.	
Expiration Date	



#### **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 vendor 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.

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				
Email				

# **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



# **OFFER**

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

· ·	ned hereby offers and agrees to furnish the material, conditions, specifications, and addenda issued as
Arizona Sales Tax No. Use Tax License No. for Out-of-State Arizona Corporation Commission File No.	
provide its federal taxpayer identification num the City of Phoenix for the purposes of reporti by the City of Phoenix under the awarded con	nmended for contract award, Offeror agrees to ber or as applicable its social security number to ing to appropriate taxing authorities, monies paid attract. If the Offeror provides its social security with appropriate state and federal officials. This 6041A.
Enter City's Registration System ID Numb Located at City's eProcurement website (see - INSTRUCTIONS - CITY'S REGISTRATION	e SECTION 2
Offeror has read, understands, and will fully a attachments and any referenced documents. independently developed without consultation	Offeror certifies that the prices offered were
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:	