

**ITB Number:** 973

**ITB Issue Date:** March 10, 2023

**Purpose:** Statewide Transportation All 64 Counties

**Procurement Method:** Invited competitive bids

**Issuing Office:** AIDT

**Issuing Office Point of Contact:** Chris Brown [cbrown@aidt.edu](mailto:cbrown@aidt.edu)

**Deadline for Receipt of Bids:** April 3, 2023, 4:00 p.m. CST

**Bid Opening:** April 4, 2023, 10:00 a.m. CST  
AIDT  
One Technology Court  
Montgomery, AL 36116

**IMPORTANT:** Bids must be received by bid close date and time stated above at the following address:

AIDT: BID 972  
Attention: Chris Brown  
One Technology Court  
Montgomery, AL 36116



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## NOTES TO BIDDERS

1. Read the entire document from beginning to end and comply with all instructions, specifications, terms and conditions of the bid. Failure to follow all instructions, terms and conditions will result in the rejection of a submitted bid.
2. Bidders must comply with all Bid Instructions (see pages 4 - 8, including Item 7 – Freight Charge FOB Destination on page 4.
3. Special programs offered for educational training should be submitted on a separate form.
4. Questions concerning this bid and/or specifications should be submitted in writing to AIDT Purchasing Agent Chris Brown at [cbrown@aidt.edu](mailto:cbrown@aidt.edu) or mail Attn: Chris Brown One Technology Court, Montgomery, Alabama 36116
  - a. **Deadline for Receipt of Written Questions March 20, 2023, 4:00 p.m. CST**
  - b. **Deadline for Posting of Written Responses to Questions: March 27, 2023, 4:00 p.m. CST**
5. AIDT is seeking to award this bid for one year, with the option to roll over for up to four additional years.

### **Statewide Transportation to all 64 Counties**

**Service of operations:** 5 days a week Monday-Friday 6:00AM-10:00pm

**Scope:** Mandatory if you're going to be late to notify the required personnel. Please contact the centers for rides.

**CHECKLIST FOR BID SUBMISSION**  
(Vendor does not have to return this form with bid response)

<b>SUBMIT WITH BID PROPOSAL:</b>	✓
Bid Contact Sheet (p. 9)	
Vendor Agreement Sheet (p.10)	
Qualification Statement (p. 11)	
Current W-9 (August 2013, issued by IRS):	
Vendor Disclosure:	
E-Verify or Alabama Immigration Compliance Form	
Bid Proposal – RESPONSE	
<b>SUBMIT WITH BID PROPOSAL, as applicable</b>	
Copy of current state, county or city business license, general contractor's license or applicable license as required by law	
Copy of General Liability (umbrella) insurance - <b>The coverage must be in effect for the contract period.</b> The copy must show amount limits for automobile, workmen's compensation, etc. (applicable for the delivery of materials, supplies, etc.). Vendor is responsible for all losses/damages caused by its employees.	
Descriptive/technical literature with bid proposal when bidding alternate items. The brands and model numbers referenced in bid provides a level of quality, and unless otherwise specified, are not restrictive. <b>Reference to a website or literature with a previous bid will not satisfy this requirement. (If Applicable)</b>	
Descriptive/technical literature package must include a full description of the items to including a minimum of manufacturer's name, model number and full descriptive literature. Please note company name, FEIN, complete mailing address, bid number and opening date in the upper left corner of substitute specifications. (If Applicable)	
<b>Failure to include descriptive literature with the bid proposal could result in bid rejection. Physical inspection and operational evaluation of equipment may also be required without cost or obligation to AIDT before award is made.</b>	
<b><u>Bonds Required for Various Bid Solicitations:</u></b>	
<ol style="list-style-type: none"> <li>1) Requirement for bonds, other than those projects covered by Title 39 of the <i>Code of Alabama, 1975</i>, as amended, will be specifically stated in the bid solicitation.</li> <li>2) Bid bonds, when required, must be submitted with the bid proposal.</li> <li>3) Performance bonds, when required, must be submitted within five (5) working days after notification of a bid award. Bond amount will be specifically stated in the bid solicitation.</li> </ol>	

## INSTRUCTIONS TO BIDDERS

1. ***“All bids shall be sealed when received”*** (The Code of Alabama 1975, Section 41-16-54) Bids delivered by the vendor, United States Postal Service, Federal Express, UPS or other delivery service **must be identified on front of the envelope in the lower left corner with the bid number, opening date and time indicated.** It is the responsibility of the vendor to have the bid proposal delivered to the correct addressee and location.
2. Bids must be received no later than date and time indicated on the bid solicitation. Late bids or improperly submitted bids will not be considered.
3. All information shall be entered in ink, typewritten or computer generated in the appropriate space on the forms. An authorized company representative must sign the bid in ink.
4. AIDT reserves the right to reject any or all bids, or any part thereof, and to waive any technicality in the bidding in the best interest of the Institute. Bids will be awarded in the best interest of AIDT.
5. This proposal is to be made without connection with any other person, company, or parties making a bid or proposal and is to be in all respects fair and in good faith, without collusion or fraud.
6. Bid prices are not to include tax. AIDT, a state government institution, is exempt by law from paying Alabama Sales Tax. This exemption is found in Section 40-23-4 (a) (11), Code of Alabama, and it further explained in the Sales & Use Tax Rule 810-6-3-.69.02. An exemption letter will be furnished upon request.
7. Bidder shall, at its sole expense, procure and keep in effect all necessary permits and licenses required for its performance of the requested work or service.
8. All bids must be notarized.
9. AIDT terms and conditions and the laws of the State of Alabama shall govern any contract resulting from this bid.
10. Bidders desiring further information or interpretation of specifications must make requests in writing to AIDT, **Attn: Chris Brown, One Technology Court, Montgomery, Alabama 36116, or email [cbrown@aidt.edu](mailto:cbrown@aidt.edu). Deadline for receipt of written questions is March 20, 2023, 4:00 p.m. CST. Deadline for posting of written responses to questions is March 27, 2023, 4:00 p.m. CST.** Answers to such requests will be given to all recorded bidders, in addendum form, which will be included as part of the contract documents.
11. **VENDOR RESPONSIBILITY:** It is the responsibility of all bidding vendors to read this document in its entirety and to comply with all instructions, specifications and terms and conditions of the bid.
12. **BID RESPONSES:**
  - a. **BID INFORMATION:** All information shall be entered in ink or type written in the appropriate space on the form. Bids must be signed in ink by an authorized individual on the Qualification Statement and returned to AIDT. Mistakes may be crossed out and corrections inserted before submission of the bid. **The person signing the bid must initial corrections, in ink.**
  - b. **BID SUBMITTED:** Bids must be submitted on the forms provided to ensure complete uniformity of wording of all proposals. Bids may be rejected if they show any omissions,

alterations in wording, conditional clauses, or irregularities of any kind.

- c. **IDENTIFICATION:** Reference Page 4, Item 1: The U.S. Postal Service may apply bar code labels on envelopes which may conceal bid identification if shown other than the lower left corner. As a result, bids can be rejected if not properly identified.
- d. **CLARIFICATION OF RESPONSE:** All responses will be reviewed for compliance with the mandatory requirements stated within the bid. AIDT Purchasing Agent may contact the vendor for clarification of any response.

- 13. **REQUESTED INFORMATION:** Any additional information requested from a vendor must be furnished within (3) working days from receipt of request or as specified in the bid. Failure to furnish information within time frame above will result in bid rejection. See Checklist, page 3 regarding items that must be submitted with bid proposal.
- 14. **ASSIGNMENT OF CONTRACT:** To assign, sublet or transfer any contract resulting from this proposal, the vendor must receive written approval by AIDT Business Office Manager.
- 15. **CHANGES/MODIFICATIONS:** Changes/modifications are allowed only by written change order approved by AIDT Business Office Manager.
- 16. **FIRM PRICING:** All prices quoted must be firm for the duration of the contract.
- 17. **AWARD METHOD:** Award will be made in writing to the single, lowest bidder meeting all specifications of bid. AIDT reserves the right to multi-award any bid, if it is in the best interest of AIDT to do so. AIDT is seeking to award this bid for one year, with the option to roll over for up to four additional years.
- 18. **CANCELLATION OF AWARD:**
  - a. AIDT reserves the right, for its convenience and without cause and without a penalty, to terminate the contract upon a thirty-(30) day written notice.
  - b. The Contractor may terminate services upon delivery of a written thirty-(30) day notice to AIDT, Attention: Chris Brown, One Technology Court, Montgomery, AL 36116.
- 19. **INVOICES:** Invoice(s) are to be billed in arrears in the name of AIDT to the 'BILL TO' address on the Purchase Order. Invoices may also be submitted to AIDT Finance: [invoices@aidt.edu](mailto:invoices@aidt.edu).
- 20. **PAYMENT METHOD:** Payment will be made to the successful bidder by check on a monthly basis. Payment terms are net 30.
- 21. **NOTE TO VENDOR:** Failure to submit required documentation with bid proposal may result in bid rejection.
- 22. **PRIMARY VENDOR/SUBCONTRACTORS**

The primary vendor if a contract is awarded shall be responsible, in total, for all work of any subcontractors. All subcontractors, if any, must be listed in the proposal. The vendor shall not assign, transfer or subcontract any portion of the contract without the written consent of the Institute. The vendor shall be responsible to the Institute for the acts and omissions of all subcontractors or agents and of persons directly or indirectly employed by such subcontractors, and for the acts and omissions of persons employed directly by the vendor.

Any awards made as a result of this document will create a contractual relationship between the vendor

and the Institute, not the subcontractor.

**23. PROPOSAL EFFECTIVE PERIOD**

All proposals submitted in response to this BID shall be effective for a 180-day period following the deadline for receipt of proposals as specified in the Schedule of Events and may not be modified, withdrawn or canceled by the Vendor during this period.

**24. ADDITIONAL REQUIREMENTS**

Vendors will be responsible for the logistics of getting referred clients to work and activities timely, including contacting clients scheduled for drop-off and pick-up, considering guidelines of how children are to be transported, and transporting only to locations and activities specifically approved by the JOBS Program. Vendors will be reimbursed for transport from a designated starting base to the point of pick up and to the point of drop off at intended locations. Vendors must be listed on the Alabama Public Service Commission's roster of approved intrastate transportation providers and provide proof of current certification. Any lapse or change in certification status must be reported within one (1) day.

**25. PROJECT STAFF/RESUMES/JOB DESCRIPTIONS**

Vendors must indicate that they have sufficient staff to perform the services required in this Bid. If sufficient staff is not currently available, describe how staff will be obtained to provide the services and the timeline for obtaining the needed staff. Indicate the number of anticipated staff for each position title. List all professional licenses held by the key staff.

## CONTRACTOR'S PROPOSAL

*Proposal: Total price per mile for services as described in following guidelines*

Price Per Mile \$\_\_\_\_\_per mile

Applicable charges for additional persons \$\_\_\_\_\_per mile

**Although there is no guarantee regarding the number of clients to be transported, the need for services may be approximated by considering county caseload statistics.**

## NONRESIDENT BIDDER INFORMATION

Act Number 2001-637 of the Alabama Legislature, and is codified as Code of Alabama, Section 39-3-5, provides as follows:

### **§ 39-3-5. Preference to resident contractors in letting of certain public contracts required; reciprocity.**

*(a) In the letting of public contracts in which any state, county or municipal funds are utilized, except those contracts funded in whole or in part with funds received from federal agency, preference shall be given to resident contractors, and a nonresident bidder domiciled in a state having laws granting preference to local contractors shall be awarded Alabama public contracts only on the same basis as the nonresident bidder's state awards contracts to Alabama contractors bidding under similar circumstances; and resident contractors in Alabama, as defined in Section 39-2-12, be they corporate, individuals, or partnerships, are to be granted preference over nonresidents in awarding of contracts in the same manner and to the same extent as provided by the laws of the state domicile of the nonresident.*

*(b) Nonresident bidders must accompany any written bid documents with a written opinion of an attorney at law licensed to practice law in such nonresident bidders' state of domicile, as to the preferences, if any or none, granted by the law of that state to its own business entities whose principal places of business are in that state in the letting of any or all public contracts.*

*(c) A summary of this law shall be made a part of the advertised specifications of all projects affected by this law. (Acts 1984, No. 84-228, p.348.)*

## **SALES TAX CERTIFICATION BY ALABAMA DEPARTMENT OF REVENUE**

### **Certification Pursuant to Act Number 2006-557**

Alabama Law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama State and Local sales, use, and/or lease tax on all taxable sales and leases into Alabama. **By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act Number 2006-557,** they are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledges that the awarding authority may declare the contract void if the certification is false.



## BID CONTACTS

### ALL BIDDERS MUST:

- Provide the names and numbers for the contact person within your organization who will be responsible for handling customer's telephone calls, faxes, e-mails, and purchase orders. Print or type the information in the spaces below if you have only one location. If you have more than one business within the State of Alabama you must furnish a list of the current locations of each of your business in the format below.

Printed Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Toll Free Number \_\_\_\_\_ Email \_\_\_\_\_

- List name of nearest authorized company in Alabama to provide service/repairs. List the company name, complete street address, phone number, contract person and their contact numbers. **The service dealer must be within 50 miles of desired location.**

Company Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact \_\_\_\_\_ Job Title \_\_\_\_\_

- List name and address of providers **within 50 miles of desired location** if different from above.

Company Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact \_\_\_\_\_ Job Title \_\_\_\_\_

## VENDOR AGREEMENT

Offer to AIDT, Montgomery, Alabama; I certify that I have read all the General Conditions and Instructions to Bidders of this bid and this offer is made without prior understanding, or connection with any entity or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I am authorized to sign this bid for the bidder. I agree to abide by all conditions of this bid request.

**Company Name:** \_\_\_\_\_ **FEIN** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Toll Free Number:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

## QUALIFICATION STATEMENT

I certify that I have read all the General Conditions and Instructions to Bidders of this bid and this offer is made without prior understanding, or connection with any entity or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I am authorized to sign this bid for the bidder. I agree to abide by all conditions of this bid request.

\_\_\_\_\_  
Name of Company (please type or print in ink)

\_\_\_\_\_  
Authorized Signature (sign in ink)

\_\_\_\_\_  
Complete Address for Mailing Purchase Order  
and Payment

\_\_\_\_\_  
Typed/Printed Name of Signature Above

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Title (please type)

\_\_\_\_\_  
Telephone Number

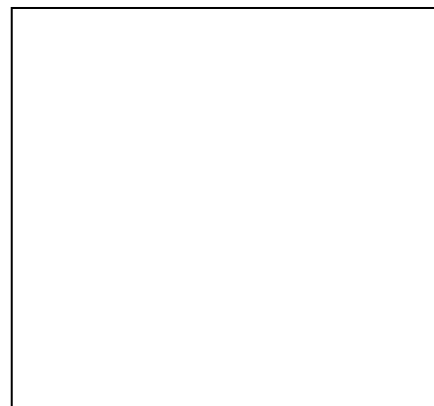
\_\_\_\_\_  
Fax Number

### ***NOTARIZATION***

Sworn and subscribed before me this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
*Notary Public Signature*

\_\_\_\_\_  
*My commission expires (date)*



## MINORITY INFORMATION

If this business is minority owned, please qualify status below:

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ )

CERTIFICATE OF COMPLIANCE WITH THE BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT 2011-535, as amended by ACT 2012-491)

DATE: \_\_\_\_\_

RE Contract/Grant/Incentive (describe by number or subject):

\_\_\_\_\_ by and between  
\_\_\_\_\_ (Contractor/Grantee) and  
\_\_\_\_\_ (State Agency, Department or Public Entity)

The undersigned hereby certifies to the State of Alabama as follows:

1. The undersigned holds the position of \_\_\_\_\_ with the Contractor/Grantee named above, and is authorized to provide representations set out in this Certificate as the official and binding act of that entity, and has knowledge of the provisions of THE BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT 2011-535 of the Alabama Legislature, as amended by ACT 2012-491) which is described herein as "the Act."
2. Using the following definitions from Section 3 of the Act, select and initial either (a) or (b), below, to describe the Contractor/Grantee's business structure.  

**BUSINESS ENTITY.** Any person or group of persons employing one or more persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood, whether for profit or not for profit.

  - a. Self-employed individuals, business entities filing articles of incorporation, partnerships, limited partnerships, limited liability companies, foreign corporations, foreign limited partnerships, and foreign limited liability companies authorized to transact business in this state, business trusts, and any business entity that registers with the Secretary of State.
  - b. Any business entity that possesses a business license, permit, certificate, approval, registration, charter, or similar form of authorization issued by the state, any business entity that is exempt by law from obtaining such a business license, and any business entity that is operating unlawfully without a business license.

**EMPLOYER.** Any person, firm, corporation, partnership, joint stock association, agent, manager, representative, foreman, or other person having control or custody of any employment, place of employment, or of any employee, including any person or entity employing any person for hire within the State of Alabama, including a public employer. This term shall not include the occupant of a household contracting with another person to perform casual domestic labor within the household.

- (a) The Contractor/Grantee is a business entity or employer as those terms are defined in Section 3 of the Act.  
\_\_\_\_ (b) The Contractor/Grantee is not a business entity or employer as those terms are defined in Section 3 of the Act.

3. As of the date of this Certificate, the Contractor/Grantee does not knowingly employ an unauthorized alien within the State of Alabama and hereafter it will not knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama;
4. The Contractor/Grantee is enrolled in E-Verify unless it is not eligible to enroll because of the rules of that program or other factors beyond its control.

Certified this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Name of Contractor/Grantee/Recipient

By: \_\_\_\_\_

Its \_\_\_\_\_

Title

The above Certification was signed in my presence by the person whose name appears above, on

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

WITNESS: \_\_\_\_\_  
Signature

Form (Rev. August 2013) Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Request for Taxpayer Identification Number and Certification</h2>	<b>Give Form to the requester. Do not send to the IRS.</b>
Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		
<b>Part I Taxpayer Identification Number (TIN)</b> Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.		
		<b>Social security number</b> <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <div style="position: absolute; left: 0; top: 0; width: 10%; height: 100%; border-right: 1px solid black;"></div> <div style="position: absolute; left: 10%; top: 0; width: 60%; height: 100%; border-right: 1px solid black;"></div> <div style="position: absolute; left: 60%; top: 0; width: 30%; height: 100%; border-right: 1px solid black;"></div> </div>
		<b>Employer identification number</b> <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <div style="position: absolute; left: 0; top: 0; width: 10%; height: 100%; border-right: 1px solid black;"></div> <div style="position: absolute; left: 10%; top: 0; width: 80%; height: 100%; border-right: 1px solid black;"></div> <div style="position: absolute; left: 90%; top: 0; width: 10%; height: 100%; border-right: 1px solid black;"></div> </div>
<b>Part II Certification</b> Under penalties of perjury, I certify that:		
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person (defined below), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.		
<b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.		
<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
<b>General Instructions</b> Section references are to the Internal Revenue Code unless otherwise noted.		
<b>Future developments.</b> The IRS has created a page on <a href="http://www.irs.gov/fw9">www.irs.gov/fw9</a> for information about Form W-9, at <a href="http://www.irs.gov/fw9">www.irs.gov/fw9</a> . Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.		
<b>Purpose of Form</b> A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.		
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:		
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), 2. Certify that you are not subject to backup withholding, or 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the		
withholding tax on foreign partners' share of effectively connected income, and 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.		
<b>Note.</b> If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.		
<b>Definition of a U.S. person.</b> For federal tax purposes, you are considered a U.S. person if you are:		
<ul style="list-style-type: none"> <li>• An individual who is a U.S. citizen or U.S. resident alien,</li> <li>• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,</li> <li>• An estate (other than a foreign estate), or</li> <li>• A domestic trust (as defined in Regulations section 301.7701-7).</li> </ul>		
<b>Special rules for partnerships.</b> Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.		

Cat. No. 10231X

Form **W-9** (Rev. 8-2013)

## VENDOR DISCLOSURE STATEMENT INFORMATION AND INSTRUCTIONS

Section 41-16-82, *Code of Alabama* 1975 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000. The disclosure statement is not required for contracts for gas, water, and electric services where no competition exists, or where rates are fixed by law or ordinance. In circumstances where a contract is awarded by competitive bid, the disclosure statement shall be required only from the person receiving the contract and shall be submitted within ten (10) days of the award.

A copy of the disclosure statement shall be filed with the awarding entity and the Department of Examiners of Public Accounts, and if it pertains to a state contract, a copy shall be submitted to the Contract Review Permanent Legislative Oversight Committee. The address for the Department of Examiners of Public Accounts is as follows: 50N. Ripley Street, Room 3201, Montgomery, Alabama 36130- 2101. If the disclosure statement is filed with a contract, the awarding entity should include a copy with the contract when it is presented to the Contract Review Permanent Legislative Oversight Committee.

Pursuant to Section 41-16-84 (b), *Code of Alabama* 1975 the State of Alabama shall not enter into any contract or appropriate any public funds with any person who refuses to provide information as required.

Pursuant to Section 41-16-86, *Code of Alabama* 1975, any person who knowingly provides misleading or incorrect information on the disclosure statement shall be subject to a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00. Also, the contract or grant shall be voidable by the awarding entity.

**Definitions as Provided in Section 41-16-81, *Code of Alabama* 1975**

**1. Family Member of a Public Employee** – The spouse or a dependent of the public employee.

**2. Family Member of a Public Official** – The spouse, a dependent, an adult child and his or her spouse, a parent, a spouse's parents, or a sibling and his or her spouse, of the public official.

**3. Family Relationship** – A person has a family relationship with a public official or public employee if the person is a family member of the public official or public employee.

**4. Person** – An individual, firm, partnership, association, joint venture, cooperative, or corporation, or any other group or combination acting in concert.

**5. Public Official and Public Employee** - These terms shall have the same meanings ascribed to them in Sections 36-25-1(23) and 36-25-1(24), *Code of Alabama* 1975, (see below) except for the purposes of the disclosure requirements of this article, the terms shall only include persons in a position to influence the awarding of a grant or contract who are affiliated with the awarding entity. Notwithstanding the foregoing, these terms shall also include the Governor, Lieutenant Governor, members of the cabinet of the Governor, and members of the Legislature. (Note: The definitions for public official and public employee are now denoted as Sections 36-25-1 (25) and 36-25-1 (26), *Code of Alabama* 1975. However, Section 41-16-86 (5), *Code of Alabama* 1975 has not been codified to reflect such updates.)

Section 36-25-1(25), *Code of Alabama* 1975, defines a **public employee** as any person employed at the state, county or municipal level of government or their instrumentalities, including governmental corporations and authorities, but excluding employees of hospitals or other health care corporations including contract employees of those hospitals or other health care corporations, who is paid in whole or in part from state, county, or municipal funds. For purposes of this chapter, a public employee does not include a person employed on a part-time basis whose employment is limited to providing professional services other than lobbying, the compensation for which constitutes less than 50 percent of the part-time employee's income.

Section 36-25-1(26), *Code of Alabama* 1975, defines a **public official** as any person elected to public office, whether or not that person has taken office, by the vote of the people at state, county, or municipal level of government or their instrumentalities, including governmental corporations, and any person appointed to a position at the state, county, or municipal level of government or their instrumentalities, including governmental corporations. For purposes of this chapter, a public official includes the chairs and vice-chairs or the equivalent offices of each state political party as defined in Section 17-13-40, *Code of Alabama* 1975.

## Instructions

Complete all lines as indicated. If an item does not apply, denote N/A (not applicable). If you cannot include required information in the space provided, attach additional sheets as necessary.

**THE DISCLOSURE STATEMENT MUST BE SIGNED, DATED, AND NOTARIZED PRIOR TO SUBMISSION.**



# State of Alabama Disclosure Statement

Required by Article 3B of Title 41, Code of Alabama 1975

ENTITY COMPLETING FORM

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

AIDT

ADDRESS

One Technology Court

CITY, STATE, ZIP

Montgomery, AL 36116

TELEPHONE NUMBER

334-242-0299

This form is provided with:

☐

Contract

☐

Proposal

☐

Request for Proposal

☐

Invitation to Bid

☐

Grant Proposal

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?

☐

Yes

☐

No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

STATE AGENCY/DEPARTMENT	TYPE OF GOODS/SERVICES	AMOUNT RECEIVED
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Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?

☐

Yes

☐

No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

STATE AGENCY/DEPARTMENT	DATE GRANT AWARDED	AMOUNT OF GRANT
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1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS	STATE DEPARTMENT/AGENCY
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2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE	STATE DEPARTMENT/ AGENCY WHERE EMPLOYED
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If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

NAME OF PAID CONSULTANT/LOBBYIST	ADDRESS
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**By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00, is applied for knowingly providing incorrect or misleading information.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Notary's Signature \_\_\_\_\_ Date \_\_\_\_\_ Date Notary Expires \_\_\_\_\_

Article 3B of Title 41, Code of Alabama 1975 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.