

## RESPONDENT AND TEAM SUMMARY FORM

**RESPONDENT:** \_\_\_\_\_

**SOLICITATION NUMBER:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PROJECT TITLE:** \_\_\_\_\_

Complete the following Table identifying your firm or company and ALL subcontractors or subconsultants you anticipate utilizing for purposes of responding to this solicitation. **Both** sections of this form must be completed. Use additional pages if needed.

Section A	RESPONDENT IDENTIFICATION																				
Respondent intends to utilize the following Vendors in connection with this project. In the spaces provided below, list the firms and corresponding information.																					
Firm Name (Prime and Subcontractor(s) or Subconsultant(s))	Vendor Phone & Email	Total Dollar Amount of Services	Scope of Work	Indicate the Category that Best Describes Each Organization Listed																	
				Non-MWBE		Certified MWBE			Non-Certified MWBE												
				Non-Minority	Certified Small Business	African American	Asian American	Hispanic American	Native American	Non-Minority Female	African American	Asian American	Hispanic American	Native American	Non-Minority Female						
<b>TOTAL</b>																					

**Section B****ACKNOWLEDGEMENT** (to be completed by the Respondent)

I hereby certify that, as Respondent to this Solicitation, that the information provided herein is true and correct.

\_\_\_\_\_  
Name of Bidder/Respondent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title