



Attachment D

FORMS, AFFIDAVITS AND DOCUMENTATION CHECKLIST

Any contract/purchase order resulting from this solicitation shall include the forms indicated below. Contractor shall complete the required forms and return them, along with the required documentation and the checklist, with the signed bid/proposal document. Failure to submit the completed forms and documentation may be a basis for rejection of your proposal.

Forms and Affidavits	
<input type="checkbox"/>	1. Certificate of Authority -complete only one (1)
<input type="checkbox"/>	2. Amendment Form
<input type="checkbox"/>	3. Consolidated Affidavits <ul style="list-style-type: none"> I. HIRING POLICY COMPLIANCE II. SLAVERY ERA RECORDS AND INSURANCE, AND PRISON INDUSTRY AND IMMIGRATION DETENTION SYSTEM RECORDS AND INTERESTS DISCLOSURE III. COVENANT OF EQUAL OPPORTUNITY IV. STATEMENT OF POLITICAL CONTRIBUTIONS AND EXPENDITURES

	Documentation	Instructions for Completion
<input type="checkbox"/>	4. Sample Employment Application	Attach a copy of a sample employment application attesting that the employer will not inquire or consider the criminal convictions of applicants for employment needed to fulfill the terms of any City contract.
<input type="checkbox"/>	5. Income and Revenue Tax Clearance	<p>Approved clearances are not required to submit a response to the RFP but will be required of the successful respondent prior to City Council approval.</p> <p>Submit requests for clearances electronically via a link in the bid response Requirement Section in the Supplier Portal. Attach evidence showing you have submitted or received clearances. Please use the below URL to complete the Income Tax and Account Receivables Clearance process:</p> <p>http://bit.ly/detroitclearances</p>
<input type="checkbox"/>	6. Three (3) years Financial Information	Attach your organization's financial statements (Balance Sheets, Income Statements and Statement of Cash Flows) for the previous three (3) years. Please do not submit your tax returns.
<input type="checkbox"/>	7. System of Awards Management (SAM)	Attach a PDF screenshot to show proof of registration, or of SAM documentation. Instructions for registering are provided in this Attachment, " SAM.GOV Registration Steps ")If using Grant funds.



CERTIFICATE OF AUTHORITY

CORPORATION CERTIFICATE OF AUTHORITY

I, _____, Corporate Secretary of
(name of corporate secretary)

_____, a _____
(complete name of corporation) (state of incorporation)

_____ corporation (the "Corporation"), **DO HEREBY CERTIFY** that the
(non-profit or for profit)
following is a true and correct excerpt from the minutes of the meeting of the Board of Directors
duly called and held on _____, and that the same is now in full force and effect:
(date of meeting)

"RESOLVED, that the Chairman, the President, each Vice President, the Treasurer, and the Secretary and each of them, is authorized to execute and deliver, in the name of and on behalf of the Corporation and under its corporate seal of otherwise, any agreement or other instrument or document ('Contract') in connection with any matter or transaction that shall have been duly approved; and the execution and delivery of any Contract by any of the aforementioned officers shall be conclusive evidence of such approval."

FURTHER, I CERTIFY that _____ is Chairman
_____ is President,
_____ is/are Vice President(s),
_____ is Treasurer,
_____ is Secretary,
_____ is Executive Director, and
_____ is _____.

FURTHER, I CERTIFY that any of the aforementioned officers or employees of the Corporation are authorized to execute and commit the Corporation to the conditions, obligations, stipulations and undertakings contained in the foregoing Contract between the City and the above-referenced Corporation and that all necessary corporate approvals have been obtained in relationship thereto.

IN WITNESS THEREOF, I have set my hand this _____ day of _____, 20____.
CORPORATE SEAL
(if any)

Corporation Secretary

PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF YOUR CORPORATION MUST BE ONE OF THE INDIVIDUALS LISTED ABOVE AS PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON BEHALF OF THE CORPORATION.



LIMITED LIABILITY COMPANY
CERTIFICATE OF AUTHORITY

I, _____, a Manager or Member of
(name of manager)
_____, L.L.C, a limited liability company (the "Company"), **DO HEREBY**
(name of company)
CERTIFY that I am a Manager or Member of the Company who has the authority to act as an
agent of the Company in executing this Certificate of Authority. I further certify that the
following individuals are Managers or Members of the Company who have the authority to
execute and commit the Company to the conditions, obligations, stipulations and undertakings
contained in the foregoing Contract between the City and the Company:

FURTHER, I CERTIFY that all necessary approvals by the Managers or Members of
the Company have been obtained with respect to the execution of said Contract.

IN WITNESS THEREOF, I have set my hand this _____ day of _____, 20_____.
COMPANY SEAL
(if any)

Manager or Member

**PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF
YOUR LIMITED LIABILITY COMPANY MUST BE ONE OF THE INDIVIDUALS
LISTED ABOVE AS A PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE
NAME OF AND ON BEHALF OF THE LIMITED LIABILITY COMPANY.**



PARTNERSHIP
CERTIFICATE OF AUTHORITY

I, _____, A General Partner in _____,
(name of general partner)

a _____ County, _____ Partnership ("the Partnership")
(county of registration) (state in which county lies)

DO HEREBY CERTIFY that I am a General Partner in the Partnership formulated pursuant to
a Partnership Agreement dated _____, and that the following is a true and
(date of meeting)

correct excerpt from the minutes of the meeting of the General Partnership held on _____
and that the same is now in full force and effect:

"RESOLVED, that each General Partner is authorized to execute and deliver, in the name and
on behalf of the Partnership, any agreement or other instrument or document ("Contract") in
connection with any matter or transaction that shall have been duly approved; and the execution
and delivery of any Contract by a general partner shall be conclusive evidence of such
approval."

FURTHER, I CERTIFY that the following persons are General Partners:

_____	_____
_____	_____
_____	_____
_____	_____

FURTHER, I CERTIFY that any of the aforementioned General Partners of the Partnership
are authorized to execute and commit the Partnership to the conditions, obligations, stipulations and
undertakings contained in the foregoing Contract between the City and the above-referenced
partnership that all necessary approvals have been obtained in relationship thereto.

IN WITNESS THEREOF, I have set my hand this _____ day of _____, 20 _____.

CORPORATE SEAL
(if any)

General Partner

**PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF
YOUR PARTNERSHIP MUST BE ONE OF THE INDIVIDUALS LISTED ABOVE AS A
PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON
BEHALF OF THE PARTNERSHIP.**



UNINCORPORATED ASSOCIATION
CERTIFICATE OF AUTHORITY

I, _____, Secretary of _____,
(name of association secretary)

an unincorporated association (the "Association"), **DO HEREBY CERTIFY** that the following is a true and correct excerpt from the minutes of the meeting of the Board of

Directors duly called and held on _____, and that the same is now
in full (date of meeting)

Force and effect:

"RESOLVED, that the Chairman, the President, each Vice President, the Treasurer, and the Secretary and each of them, is authorized to execute and deliver, in the name of an on behalf of the Association and under its Association seal or otherwise, any agreement or other instrument or document ("Contract") in connection with any matter or transaction that shall have been duly approved; and the execution and delivery of any Contract by any of the aforementioned officers shall be conclusive evidence of such approval."

FURTHER, I CERTIFY that _____ is Chairman
_____ is President,
_____ is/are Vice President(s),
_____ is Treasurer,
_____ is Secretary,
_____ is Executive Director, and
_____ is _____.

FURTHER, I CERTIFY that any of the aforementioned officers of the Association are authorized to execute or guarantee and commit the Association to the conditions, obligations, stipulations, and undertakings contained in the foregoing Contract between the City and the above-referenced Association and that all necessary Association approvals have been obtained in relationship thereto.

IN WITNESS THEREOF, I have set my hand this _____ day of _____, 20__.
CORPORATE SEAL
(if any)

Association Secretary

PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF YOUR ASSOCIATION MUST BE ONE OF THE INDIVIDUALS LISTED ABOVE AS A PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON BEHALF OF THE ASSOCIATION.



AMENDMENT FORM

Project/ RFP No.: _____

Project Title: _____

The undersigned acknowledges receipt of the following amendments to the request for Proposal (RFP) document:

Amendment No. _____, Dated _____ Company

Name: _____

Authorized Signature: _____

Name: _____ (Print)

Title: _____

Date: _____

City of Detroit
Office of Contracting and Procurement

CONSOLIDATED AFFIDAVITS

The following attestations must be provided to the City of Detroit as part of the contract approval process. Please fill out required information, attach required supplemental documents and have it notarized before uploading

I. HIRING POLICY COMPLIANCE

I _____, being duly sworn, state that I am the _____ of

_____, and that I have reviewed the hiring policies of this employer, I affirm that these policies are in compliance with the requirements of Chapter 17, Article V, Division 6 of the 2019 Detroit City Code, being Sections 17-5-261 through 17-5-266 thereof. I further affirm that this employer will not inquire or consider the criminal convictions of applicants for employment needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted, until such times as the employer interviews the applicant or determines that the applicant is qualified.

In support of this affidavit, **I HAVE ATTACHED A COPY OF THE APPLICATION** that will be used to hire employees needed to fulfill the terms of any City contract that may result from the competitive procedure in connection with which this affidavit is submitted.

**II. SLAVERY ERA RECORDS AND INSURANCE, AND PRISON INDUSTRY
AND IMMIGRATION DETENTION SYSTEM RECORDS AND INTERESTS
DISCLOSURE. YOU MUST COMPLETE EACH ITEM (4,5, 6 AND 7).**

1. Name of Contractor: _____

2. Address of Contractor: _____

3. Name of Predecessor Entities (if any): _____

4. Prior Affidavit Submission? ___ No _____ Yes, on: _____
 (Date of prior submission)
5. ___ Contractor was established in (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

OR

___ Contractor has searched its records and those of any predecessor entity, and has found no record that Contractor or any predecessor(s) made any investments in, or derived profits from, the slave industry or slave holder insurance policies.

OR

____ Contractor has found records that Contractor or its predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

6. ___ Contractor has searched its records and those of any and all predecessor entities, and has found no record that indicate Contractor or its predecessor(s) have used inmate labor, or have derived income directly from, or have had any investments in, the construction, operations, services or activities of prisons.

OR

___ Contractor has found records that indicate Contractor or its predecessor(s) have used inmate labor, or have derived income directly from, or have had any investments in, the construction, operations, services or activities of prisons. The nature of the use of inmate labor, profits, or investments is disclosed in the attached document(s).

7. Contractor has searched its records and those of any and all predecessor entities, and has found no record that indicates Contractor or its predecessor(s) have derived any income directly from, or have had any investments in, the construction, operations, services, or activities of facilities in the United States that are used for the detention of persons who are not citizens or nationals of the United States.

OR

____ Contractor has found records that indicate Contractor or its predecessor(s) have derived any income directly from, or have had any investments in, the construction, operations, services, or activities of facilities in the United States that are used for the detention of persons who are not citizens or nationals of the United States. The nature of the profits or investments is disclosed in the attached document(s).

I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge, and that all documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

III. COVENANT OF EQUAL OPPORTUNITY

I, _____ being a duly authorized representative of _____, (hereinafter “Contractor”), am hereby authorized to enter into a Covenant of Equal Opportunity, (hereinafter “Covenant”) with the City of Detroit, (“hereinafter” City); obligating the Contractor and all sub-contractors, not to discriminate against any employee or application for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his/her hire, promotion, job, assignment, tenure, terms, conditions, or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression; except as otherwise exempted under Section 23-2-6 of the 2019 Detroit City Code.

Contractor will ensure that the City of Detroit Human Rights Department shall receive notification of all potential sub-contractors and a copy of their Covenant prior to the commencement of work on any City of Detroit contract. Contractor further agrees that the City of Detroit reserves the right to require additional information prior to, during, and at any time until after the Covenant is fully executed.

Furthermore, Contractor agrees that this Covenant is valid for the life of the contract and/or for a specified period of time as indicated below and that a breach of this Covenant shall be deemed a material breach of contract and be subject to damages pursuant to Section 23-4-11(e) of the 2019 Detroit City Code.

RFP/Contract No.: (if applicable)

IV. STATEMENT OF POLITICAL CONTRIBUTIONS AND EXPENDITURES

City Charter Sec. 4-122: For purposes of conflicts of interest, the City shall require in all of its contractual agreements, including, but not limited to, leases, service and equipment agreements and including contract renewals, that the contractor provide a statement listing all political contributions and expenditures (“Statement of Political Contributions and Expenditures”), as defined by the Michigan Campaign Finance Act, MCL 169.201, et seq., made by the contractor, its affiliates, subsidiaries, principals, officers, owners, directors, agents or assigns to elective city officials within the previous four (4) years. Individuals shall also list any contributions or expenditures from their spouses.”

Instructions: In accordance with Sec. 4-122 of the 2012 Detroit City Charter, please provide the following information. If additional space is needed, please enter “see additional sheet(s)” on the last row and attach

additional sheets.

In Column A, enter the name of the person or company that made the contribution or expenditure. If there were no political contributions or expenditures made, enter NONE.

In Column B, enter the relationship of the donor to the contractor or vendor, that is, contractor, affiliate, subsidiary, principal, officer, owner, director, agent, assignee, or spouse of any of the foregoing who are individuals.

In Column C, enter the name of the recipient, an elective city official which under Charter § 3-107, includes only the Mayor, the City Clerk, and members of the City Council and the Board of Police Commissioners.

In Column D, enter the amount of the contribution or expenditure, as defined in the Michigan Campaign Finance Act, 1976 PA 388, MCL 169.204 and MCL 169.206.

In Column E, enter the date of the contribution or expenditure. This statement must include all contributions and expenditures within the previous four years.

A	B	C	D	E
Donor	Relationship to Contractor/Vendor	Recipient	Amount of Contribution or Expenditure	Date

Except as set forth above, I certify that no contributions or expenditures were made to elective city officials within the previous four (4) years by the contractor, its affiliates, subsidiaries, principals, officers, owners, directors, agents, assigns, and, if any of the foregoing are individuals, their spouses.

SIGNATURES AND ACKNOWLEDGEMENT:

I understand that the information provided in this consolidated affidavit will be relied upon by the City of Detroit in awarding the proposed bid, solicitation, contract, or lease. I swear or affirm that I have read this document, that I the authority to provide these disclosures and to bind the Contractor, and that the information provided herein is accurate. I have attached all required supplemental documents.

Sign name: _____

Print name: _____

Title: _____

STATE OF MICHIGAN)
_____ COUNTY)

Sworn and subscribed to before me on _____, 20__, by _____,
Date Name

the _____ of _____.
Title Contractor

Sign: _____

Print: _____

Notary Public, _____ County, Michigan

Acting in _____ County

My Commission Expires: _____

Required Documentation

Sample Employment Application

Attach a copy of a sample employment application attesting that the employer will not inquire or consider the criminal convictions of applicants for employment needed to fulfill the terms of any City contract

Income and Revenue Tax Clearance

Approved clearances are not required to submit a response to the RFP but will be required of the successful respondent prior to City Council approval. Submit requests for clearances electronically via a link in the bid response Requirement Section in the Supplier Portal. Attach evidence showing you have submitted or received clearances.

Please use the below URL to complete the Income Tax and Account Receivables Clearance process:

<http://bit.ly/detroitclearances>

Three (3) Years Financial Information

*Attach your organization's financial statements (Balance Sheets, Income Statements and Statement of Cash Flows) for the previous three (3) years. Please **do not** submit your tax returns.*

System of Awards Management

Attach a PDF screenshot to show proof of registration, or of SAM documentation.(grant funds only).