

Vendors Statements and Certifications

*1. Acceptance of Contract Terms and Conditions

I, _____, as an authorized representative of _____, hereby agrees that if awarded any contract as a result of the Children's Network of Hillsborough's Intent to Negotiate number ITN-BBC01 will comply with the requirements, terms, and conditions stated in the Intent to Negotiate and in the Children's Network of Hillsborough's Standard Contract. In recognition thereof the offeror's representative has read, understood, and with which it agrees to comply and any intent by the offeror to deviate from the terms and conditions set forth therein may result, at the CNHC's exclusive determination, in rejection of the proposal.

Type Name of Authorized Official:	Title:
Signature of Authorized Official:	Date:

*2. Statement of No Involvement

I, _____, as an authorized representative of _____, certify that no member of this firm nor any person having interest in this firm has been awarded a contract by the Children's Network of Hillsborough on a noncompetitive basis to:

1. develop this Intent to Negotiate,
2. perform a feasibility study concerning the scope of work contained in this Intent to Negotiate, or
3. develop a program similar to what is contained in this Intent to Negotiate.

Type Name of Authorized Official:	Title:
Signature of Authorized Official:	Date:

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*3. Proof of Signature Authority
This Intent to Negotiate shall include proof of signature authority if someone signs the Intent to Negotiate other than the President or Chairperson of the Board of Directors. This proof shall be one of the following: A written statement by the President or Chairperson of the Board delegating authority to a particular person, a copy of the entity's by-laws reflecting signature authority to a particular position, or a copy of the Board of Directors' meeting minutes that shows action to delegate signature authority to a particular person or position. If delegating signature authority, please complete the below and include the above requested document.
Type Name of President or Chairperson of the Board of Directors:
Type Title of Person to Whom Signature Authority is Delegated:
Type Name of Person to Whom Signature Authority is Delegated:

4. Conflict of Interest Statement (Non-Collusion)	
I hereby certify, that all persons, companies, or parties interested in the Intent to Negotiate as principals are named therein, that the Intent to Negotiate is made without collusion with any other person, persons, company, or parties submitting a proposal; that it is in all respect made in good faith; and as the signer of the Intent to Negotiate, I have full authority to legally bind the offeror to the provisions of this proposal.	
Type Name of Authorized Representative:	Title:
Signature of Authorized Representative:	Date:

5. Certification of Drug-Free Workplace Program	
I hereby certify that my agency currently maintains a drug-free workplace environment in accordance with Chapter 287.087, F.S., and will continue to promote this policy through the implementation of that section.	
Type Name of Authorized Representative:	Title:
Signature of Authorized Representative:	Date: