

Bucks County Free Library
Request for Legal Services Proposals
Addendum B
Cover Sheet

General

Law Firm Name: _____

Address: _____

Phone: _____

E-mail: _____

Website: _____

Contact Person: _____

Statement of Minimum Qualifications

I, _____ (NAME) hereby declare that I am the _____ (TITLE) of _____ (NAME OF FIRM) and I am duly authorized to sign this profile and declaration on behalf of the above named firm. All information set forth in this profile and declaration and all attachments hereto are, to the best of my knowledge, true, accurate, and complete as of the submission date.

The signer further certifies that (INITIAL)

_____ The firm has carefully examined all instructions, requirements, specifications, and terms and conditions of the RFP for which the proposal is submitted. The firm understands all instructions, requirements, specifications, and terms and conditions of the RFP, and hereby offers and proposes to furnish the goods and services described herein at the prices, fees, or rates identified in this proposal, in accordance with the instructions, requirements, specifications, and terms and conditions of the RFP.

_____ The firm is in full compliance with all applicable federal, state, and local laws, rules, regulations, and ordinances regarding business practices.

_____ All statements, information, and representations prepared and submitted in this proposal are current, complete, true, and accurate.

_____ Submission of this proposal indicates the signer's acceptance of the evaluation technique and that some subjective judgments may be made by BCFL as part of the evaluation.

_____ The firm carries all required insurance and licenses as outlined in this RFP and if selected will provide certificates of insurance before the engagement period begins.

_____ The firm is registered in the Commonwealth of Pennsylvania. (Please attach a copy of the registration.)

_____ There have been no claims, litigation, or other issues filed or pending against the firm in the past 5 years except as described in an attachment to this proposal if applicable.

DATE: _____

AUTHORIZED SIGNATURE/S

_____ (NAME/TITLE)

_____ (NAME/TITLE)