



CITY OF BLOOMINGTON

REQUEST FOR QUOTE

Quote #2022 – HAND – 410 S Highland Ave
City of Bloomington, Indiana
Housing and Neighborhood Development
April 20, 2022

Remove all

SECTION 1.0

NOTICE OF QUOTE REQUEST

#2022-HAND-410 S Highland Ave

SCOPE OF QUOTE

The City of Bloomington Housing and Neighborhood Development (hereinafter “City”) is issuing a quote to select a qualified Company to provide *Services to reconstruct a failed basement concrete block wall at this location. HAND will be available on-site at 1:30 pm local time, Thursday, April 28, 2022*

1.1 RFQ TIMELINE – All times are local time unless specifically noted

Quote Title and Number:	Foundation Wall Repair #2022 – HAND – 410 S Highland Ave
Issue Date:	April 20, 2022
Quote Submittal Deadline:	May 13, 2022 at 4:30 p.m. local time
Address Quote to:	Housing and Neighborhood Development 401 N Morton St., Ste. 130 Bloomington, IN 47404
Method of Submittal:	US Mail, Overnight or Parcel Delivery, or Hand Delivered or Electronic or Fax submissions are acceptable.
Affirmative Action Plan Due:	No later than 4:30 p.m. local time, Thursday May 12, 2022
Opening of Quotes:	Quotes shall be opened and reviewed by city staff on May 16, 2022 at City Hall Suite 130, Bloomington, IN 47404

Contact Person, Title:

Michael Arnold,

E-mail Address:

arnoldm@bloomington.in.gov

Phone/Fax Numbers:

Phone: 812.349.3420, 812.349.3582

2.1 EVALUATION

Quotes will be evaluated on the basis of overall cost, experience, and compliance with specifications included in the quote request. The following criteria may also be used to determine the best value for the City:

- (a) Ability to meet specifications or qualifications set out herein
- (b) Company's experience, service history, reputation and capabilities when applicable, and
- (c) References
- (d) Cost of Services

2.2 AWARD

An award, if issued, will be made to a responsible and responsive Company submitting the best overall value to the City, and complies with the conditions as provided in Section 2.1.

- 2.2.1 The City reserves the right to award on an all-or-none basis, or award to multiple Companies, if necessary.
- 2.2.2 The City reserves the right to rescind any award if it is determined the offer is not in the best interest of the City, or if errors, omissions, inaccuracies, non-compliance or any deficiencies are discovered after the award has been issued.
- 2.2.3 If the City determines that all quotes received should be rejected, Companies shall be notified by the Purchasing Manager accordingly. The City may or may not resubmit the quote request.
- 2.2.4 Quotes may be withdrawn any time *before* the scheduled deadline for receipt of quotes; no quote may be modified or withdrawn for a period of sixty (60) calendar days thereafter.
- 2.2.5 The City reserves the right to reject the submittal based on its assessment of the Company's prior performance.
- 2.2.6 A City of Bloomington Public Servant is required to notify the Purchasing Manager prior to submitting a quote for consideration to determine eligibility. State law IC 35-44.1-1-4 prohibits a Public Servant, or their dependents from deriving a profit from a contract or a purchase from the government entity they serve unless certain disclosure requirements are met. A Public Servant who knowingly or intentionally executes a contract or purchase without full disclosure or proper approval from the government entity commits conflict of interest which is a Level 6 Felony, which is punishable by six (6) months to two and half (2 ½) years in jail and/or up to a \$10,000 fine.

3.1 SUBMITTALS

Quotes must be received by the date and time set for closing receipt of offers. The quotes submittal shall be identified with the RFQ Number and Title, and the Company's Name.

- 3.1.1 Quotes must be received no later than 4:30 p.m. local time on **May 13, 2022**. Late submittals shall not be considered.
- 3.1.2 It is the responsibility of the Company to assure delivery of quote documents prior to the established deadline. To confirm receipt of your submittal, please contact Michael Arnold at 812.349.3420 or arnoldm@bloomington.in.gov.

3.2 SUBMITTAL INSTRUCTIONS

The Company shall complete and submit the **Quote Form (Exhibit A)** provided in this packet. Include a brief summary of company history and experience, pricing information and reference request information.

3.2.1 **REFERENCES** - The summary shall also include three (3) business references of recent projects similar in nature to the Scope of Work requested in this RFQ. Include a brief summary of the work performed for each reference, and a date of when this work was completed.

3.2.2 **AFFIRMATIVE ACTION PLANS (Exhibit B) – (REQUIRED ON CONTRACTS OVER \$10,000)**

Each Company submitting an offer for over \$10,000.00 shall submit and have approved by the City of Bloomington Contract Compliance Officer, Barbara McKinney, his/her written ***Affirmative Action Plan no later than 4:30 p.m. local time, Thursday May 12th, 2022***

The Affirmative Action Plan details and paperwork are provided in this Request for Quote in **Exhibit B**.

Do NOT submit your Plan with your Quote Documents. See instructions in the Exhibit.

3.2.4 **AFFIDAVITS (Exhibit C & D)** – Companies submitting a quote shall also include the following Affidavits with its Quote submission. The Affidavits must be properly executed and notarized to be considered valid.

- E-Verify Employment Affidavit (**Exhibit C**)
- Non-Collusion Affidavit (**Exhibit D**)

3.2.5 Quote submittals shall include all of the completed forms shown below:

1. City of Bloomington Quote Form with pricing (**Exhibit A**)
2. Affirmative Action Plan (**Exhibit B**) (When applicable)
3. E-Verify Employment Affidavit (**Exhibit C**)
4. Non-Collusion Affidavit (**Exhibit D**)

Note: The Affirmative Action Plan (**Exhibit B**) should ***not*** be submitted with the quote. The plan is required to be approved prior to the quote deadline. See Section 3.2.3 for details.

3.3 INCOMPLETE INFORMATION

Failure to complete or provide any of the information requested in this Request for Quote, including reference requests, and/or additional information request when indicated, may result in disqualification by reason of "non-responsiveness."

3.4 INQUIRES AND ADDENDA

It is the responsibility of the Company to clarify any details in question before a quote is submitted. All questions should be emailed to the attention of Michael Arnold at arnoldm@bloomington.in.gov. Responses shall be in written form via email to the requesting Company within one (1) business day, when possible. If necessary, an addendum or addenda will be issued, and accessible on the City's RFP page which is located here: <https://bloomington.in.gov/rfp>. It is the responsibility of the Company to access the City's RFP web page before submitting a quote to ensure no updates, additions, omissions, or corrections have been posted.

SECTION 4.0

GENERAL TERMS AND CONDITIONS

4.1 REJECTION OR PARTIAL ACCEPTANCE

The City reserves the right to accept or reject any or all quotes or parts thereof. The City has the right to award by individual line item, by a group of line items, or as a total. The City further reserves the right to waive technicalities and formalities in quotes, as well as to accept in whole, or in part.

4.2 CONTRACT INFORMATION

Any award for Services will require a properly executed Agreement of Services contract which shall include a Scope of Work, compensation not to exceed amount, the term of the contract, General Terms and Conditions, and any specific Terms and Conditions required based on the type of service being provided

4.3 ERRORS OR OMISSIONS

The City is not responsible for the Respondent's errors and/or omissions. It is the responsibility of the Respondent to notify the Purchasing Manager as soon as any ambiguities, inconsistencies, or omissions are identified.

- 4.3.1 The quote may be rejected if it shows any omissions, alterations of the form, additions not called for in the quote, or any irregularities of any kind.

4.4 INSURANCE

If awarded a contract the Company shall maintain the minimum amount of insurance coverage shown below during the performance period of the service contract. If additional Insurance coverage is required above the types and amounts listed in this section, it will be stated in the contract supplied with this request.

- 4.4.1 All insurance policies shall be issued by an insurance company authorized to issue such insurance in the State of Indiana.
- 4.4.2 Commercial General Liability (Occurrence Basis) bodily injury, personal injury, property damage, contractual liability, products-completed operations, Insurance coverage, with a minimum combined single limit coverage amount of \$1,000,000 for each occurrence, and \$2,000,000 in the aggregate.
- 4.4.3 Comprehensive Automobile Liability Insurance coverage, with a minimum combined single limit of \$1,000,000 for each person, and \$1,000,000 for each accident.

- 4.4.4 Worker's Compensation Insurance coverage in accordance with the statutory requirements.
- 4.4.5 Umbrella Excess Liability insurance coverage with a minimum of \$5,000,000 for each occurrence and \$5,000,000 in the aggregate. The deductible on the Umbrella Liability shall not exceed \$10,000.
- 4.4.6 The City of Bloomington, the Department, the officers, employees, and agents of each shall be named as additional insured under the General Liability Insurance and Automobile Liability Insurance policies. The policies shall stipulate that the insurance will operate as primary insurance and that no other insurance effected by the City will be called upon to contribute to a loss.

4.5 COMPLIANCE

The Company warrants and agrees that its performance under any type of contract that may be rendered from this quote will at all times comply with all local, state and federal laws, codes, rules, ordinances, and regulations. Company further agrees they and their employees are properly licensed to perform the Scope of Work for this request if the State of Indiana requires a current and valid license.

The Company is solely responsible for the acquisition and payment of all permits required for this project. This may include but not limited to building permits, disposal permits and any other city, county, state and federal permits required for the execution of this contract. It shall also be the responsibility of the Company to secure any local, state and federal agency approvals prior to the commencement of work.

4.6 WARRANTIES

The Company warrants that all work, articles, equipment, materials, and goods furnished or used in the performance of this contract shall be consistent with manufacturer's specifications and shall be free from defects. Also, the Company shall warrant their work for one (1) year from the date of project completion.

The Company also warrants that all Services and Workmanship furnished under this contract shall conform to the methods, standards and best practices of the trade, and all work shall be performed by skilled and experienced staff or workers trained in the specific services covered by this contract.

4.7 PERFORMANCE AND PAYMENT BONDS

Contracts for public work *more than \$100,000* will require the successful Contractor to furnish Performance and Payment Bonds for one hundred percent (100%) of the contract amount before the execution of the contract, and said bonds shall remain in effect for a period of one (1) year after final acceptance of the work.

4.8 RETAINAGE

Contracts for public work *more than \$100,000* require retainage provisions. The retainage amount shall be placed in an escrow account. The City shall withhold five percent (5%) of the total contract dollar value for all work completed until the contract work is one hundred (100%) completed. If the Contractor opts to accept a Lump Sum Payment then retainage will not be required.

5.1 COMPANY/VENDOR REGISTRATION

Upon notification of an award of a contract, a Company must meet the approval requirements of the City. Therefore, the Company shall submit a current and completed Request for Taxpayer Identification Number and Certification form (IRS Form W-9) to the Controller's office ***as soon as they have been notified of an award of a contract.*** A substitute IRS W-9 form can also be obtained from the City of Bloomington website located here: <http://bloomington.in.gov/controller>. The completed documents must be submitted through one of the methods listed on the form.

5.2 PAYMENT PREFERENCE

The City's preferred method of payment is Electronic Funds Transfer (EFT). Payments processed through an EFT save dollars by increasing efficiency and streamlining the payment process. EFT payments eliminate the cost of paper, printing, postage, paperwork, and time. If awarded a contract, the Company shall submit a completed EFT form to the Controller's office through one of the methods listed on the form. The form is located on the City of Bloomington website located here: <http://bloomington.in.gov/controller>.

5.3 TAX EXEMPTION

The City of Bloomington is exempt from payment of all state and federal sales taxes. Tax documents are available upon request.

5.4 ABANDONMENT

Notwithstanding any other provision of this Award, if funds for the continued fulfillment of the Award by the City are at any time not forthcoming or are insufficient, through failure of any entity to appropriate the funds or otherwise, then the City shall have the right to terminate this Award or Contract without penalty by giving prior written notice documenting the lack of funding in which instance, unless otherwise agreed by the City and Recipient, this Award shall terminate and become null and void. The City agrees that it shall make its best effort to obtain sufficient funds, including but not limited to, including in its budget for each fiscal period during the term of this Award a request for sufficient funds to meet its obligations under the Award in full.

SECTION 6.0**SCOPE OF WORK**

Obtain all permits required to complete the repairs

Remove the debris from the failed portion of the foundation wall and dispose of properly

Verify the footing is intact and make any necessary repairs

Re-build the deteriorated/failed portion of the basement foundation wall

Insure all floor joist and structural members are properly secured and stabilized

Verify all openings are secured or properly sealed to prevent unauthorized entry



CITY OF BLOOMINGTON QUOTE FORM
RFQ #2022 – HAND – 410 S Highland Ave

SEND OR DELIVER QUOTE TO:
City of Bloomington Housing and Neighborhood Development.
401 N Morton St. Ste. 130
Bloomington, IN 47404

Pricing shall include all costs, including labor and material and shall include a detailed breakdown of the cost of work by line items. The detailed cost information can be included on an additional page.

ITEM NO.	DESCRIPTION	COST
1	<i>Proper Removal of Debris</i>	\$ _____
2	<i>Repair of footing – if required</i>	\$ _____
3	<i>Replacement of the failed block foundation wall</i>	\$ _____
4	<i>Stabilization of floor joists and other structural members</i>	\$ _____
5	<i>Seal openings as required for compliance</i>	\$ _____

Provide start date and completion date with anticipated weather days included

Start Date _____ **Completion Date** _____

VENDOR / CONTRACTOR INFORMATION

Company: _____

Name (print): _____

Address: _____

Telephone: _____ Fax: _____

E-Mail: _____

Signature: _____

(Must be signed by an authorized company representative.)

CITY OF BLOOMINGTON QUOTE FORM

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BUSINESS EXPERIENCE AND QUALIFICATIONS

Document prior business experience with similar projects and give a detailed listing of the company's qualifications which are applicable to the Scope of Work listed in the Request for Quote.

Number of years engaged in contracting business under present firm's name: _____.

Have you ever defaulted on a contract? If yes, when, with whom, and why?

Are you a City employee, the spouse of a City employee, or the dependent of a City employee? Please check yes _____ or no _____.

REFERENCES

Please provide three (3) customer references for contracts of similar scope and size.

1. Contact Name: _____
Company Name: _____
Address: _____
Phone: _____ Email Address: _____

2. Contact Name: _____
Company Name: _____
Address: _____
Phone: _____ Email Address: _____

3. Contact Name: _____
Company Name: _____
Address: _____
Phone: _____ Email Address: _____

[Attach additional sheets if needed]



City of Bloomington Human Rights Commission

Updated January 1, 2022

To: Prospective Bidders/Vendors

RE: Affirmative Action, Harassment Policy, Living Wage Ordinance, and Drug Testing

Policy FROM: Barbara E. McKinney, Human Rights Director/Contract Compliance Officer

AFFIRMATIVE ACTION: All bidders and vendors with the City of Bloomington for projects in excess of \$10,000.00 must submit an affirmative action plan to my office. This plan must insure applicants and employees are treated in a manner that provides equal employment opportunity and tends to eliminate inequality based upon race, religion, color, sex, national origin, ancestry, disability, sexual orientation, gender identity, veteran status and/or housing status.

Even if your company already has a plan on file with the City, you must check with me to make sure it complies with our current requirements, including having a workforce breakdown form that is no more than six months out of date. If you already have a plan, but it does not cover all of the City's current requirements, you may submit a separate supplement with your plan to fill any gaps.

You must submit your written affirmative action plan (or supplement) to me at least twenty-four hours before the bid, quote or proposal deadline. You must submit your plan to me separately from your bid or quote. Twenty-four hours will give me sufficient time to review your and the other plans. I recommend you submit your affirmative action plan to me earlier, if possible, so you and I will have time to work out any problems that may be in your plan. Bidders who fail to submit acceptable plans by the deadline are subject to disqualification.

I strongly advise you to confirm with me that I have received your plan and that it meets our requirements well before the submittal deadline. We will make every effort to work with you to clear up any problems. However, it remains your responsibility to confirm that I have received your plan and that it complies with our requirements. If you fail to confirm that I received and approved your plan, you risk losing your eligibility to submit a bid or quote. We will be glad to provide a receipt upon request. Please let us know if you want a receipt when you submit your plan.

You must insure all of the required protected classes listed above are included in your plan. In addition to other requirements, your plan **MUST** include a current workforce breakdown, an internal grievance procedure, a non-retaliation statement, designation of a person by name or position who is responsible for implementing the plan, applicability to both applicants and employees, recruitment of minorities, equal access to training programs, and an explanation of your methods of communicating the operations of your affirmative action plan to your employees and prospective applicants.

Accompanying this letter you will find the following materials:

1. A workforce breakdown form. You MUST submit a workforce breakdown form (sometimes called a “utilization report”) with your affirmative action plan. This form is provided for your convenience. If you already have a current form you have completed for another jurisdiction that includes the same type of information, you may submit a copy of that form instead of using our form. Your workforce breakdown data cannot be more than six months old. Even if you already have an acceptable affirmative action plan on file with my office, you should submit a new workforce breakdown each time you bid for a city contract, to be sure we have up-to-date figures.
2. An affirmative action plan checklist. I will use this checklist to review your affirmative action plan. If you compare your plan with this list, you should be able to tell whether your plan fulfills the City’s requirements. If your plan omits any elements on the checklist, your plan will not be approved.
3. A sample affirmative action plan that you may amend and adapt as your own.

These documents may be useful if your company has not designed an affirmative action plan before. Feel free to adopt this plan as your own or to amend it to meet your needs.

Additional materials, such as the City of Bloomington’s Contract Compliance Regulations, are available from my office upon request.

HARASSMENT POLICY: All bidders and vendors required to submit an affirmative action plan now must also submit a harassment plan. The harassment plan must, at minimum, include a definition of harassment, the name or title of the individual designated to receive and investigate complaints and a statement that the contractor will not retaliate against an employee for complaining about harassment. A model harassment policy is included for your convenience as part of our attached model affirmative action plan, which you may amend and adapt as your own. Please note that this harassment policy requirement is new, adopted by the Bloomington Common Council in June, 2019.

LIVING WAGE: Also, please be aware that you may be required to comply with the Bloomington Living Wage Ordinance. Whether the LWO applies to your project depends upon the size and type of your project and the number of people you employ. If you have questions about the applicability of the LWO, click on the LWO flow chart at www.bloomington.in.gov/livingwage, or call me. For 2021, the living wage for covered employees is \$13.29 an hour. The living wage for 2022 will be \$14.01.

DRUG TEST POLICY: Finally, please be aware that if you are submitting a bid for a public works project with an estimated cost of \$150,000.00 or more, you will need to submit you company’s written drug testing plan with your bid. Your plan must comply with I.C. 4-13-18-1. Failure to do so may make you ineligible to be awarded a bid or contract. Please see your bid packet for more details.

If you have any questions, contact me at 812.349.3429 or email me at mckinneb@bloomington.in.gov. My office hours are Monday through Friday, 8-5.

Thank you.

Model Affirmative Action Plan and
Harassment Policy

_____, declares its policy to provide equal opportunity in employment, training and advancement, and to administer its employment practices without regard to race, color, religion, sex, national origin, ancestry, disability, sexual orientation, gender identity, veteran status, or housing status. Our policy of nondiscrimination will prevail throughout every aspect of our employment practices, including recruitment, hiring, training and all other terms and conditions of employment. We shall implement this affirmative action plan to make it widely known that equal employment opportunities are available on the basis of individual merit. We shall survey and analyze our employment workforce annually to determine what steps, if any, are needed to conform effectively to this equal employment policy.

Responsible Officer

Mr. or Ms. _____ (or the _____ officer)
is the equal employment opportunity officer for our company and is responsible for implementing this affirmative action policy.

Publication of Policy

Our employees will be made aware of our commitment to affirmative action through the following procedures:

- o posting notices on employee bulletin boards,
- o including our policy statement and plan in our personnel manual,
- o regularly sending out notices of our policy in paycheck envelopes, and/or
- o training supervisors to recognize discriminatory practices.

We will make potential employees aware of our policy through the following procedures:

- o including the words "Equal Opportunity Employer" in all of our advertisements and notices for job openings,
- o notifying employment agencies about our commitment, and
- o sending notice of our policy to unions.

Implementing Our Policy

Our affirmative action plan will be implemented by widening our recruitment sources. We shall advertise in newspapers and other media that reach people in protected classes. We shall send job notices to schools with large percentages of students in the protected classes and to local groups that serve these classes.

We shall examine our hiring practices periodically to insure that we consider only job-related qualifications in filling our positions. We shall discard irrelevant educational requirements and unnecessary physical requirements. We shall ask only job-related questions on our employment applications.

We shall keep affirmative action information on each applicant who voluntarily provides this information, but separate from his or her application. We shall keep records on our hiring decisions to evaluate the success of our affirmative action measures. We shall decide placement, duties, benefits, wages, training prospects, promotions, layoffs and terminations without regard to race, sex, religion, color, national origin, ancestry, disability, sexual orientation, gender identity, veteran status or housing status.

GRIEVANCE PROCEDURE

If an employee or applicant feels she or he has been discriminated against on the basis of race, sex, religion, color, national origin, ancestry, disability, sexual orientation, gender identity, veteran status or housing status, she or he may bring the complaint to her or his immediate supervisor. If the complaint is not resolved readily at that level, she or he may submit it to _____ (personnel officer, corporate president, other) who will make a final decision on its validity. This grievance process does not preclude him or her from complaining to local, state or federal civil rights agencies. We will not retaliate against an employee or applicant for voicing a grievance or for filing a complaint with the appropriate agency.

Our current workforce breakdown is shown on the attached form.

Policy prohibiting harassment in the workplace

1. It is the policy of _____(company name) to maintain a workplace free of harassment on the basis of race, sex, color, ancestry, national origin, religion, disability, age, sexual orientation, gender identity, housing status or veteran status. Harassment, as defined herein, is strictly prohibited in the workplace, and is punishable by appropriate discipline up to and including termination.
2. Harassment means any unwelcome or offensive conduct, whether written, verbal or physical, which is
 - a. directed at or to an employee because of his or her actual or perceived race, sex, color, ancestry, national origin, religion, disability, age, sexual orientation, gender identity, housing status or veteran status or
 - b. directed toward any person concerning an individual, or a class of individuals, because of the race, sex, color, ancestry, national origin, religion, disability, age, sexual orientation, gender identity, housing status or veteran status of the individual or class of individuals. For example, racial or ethnic slurs or derogatory epithets are prohibited in the workplace, regardless of whether a member of the racial or ethnic group is present when the statement is made.

Harassment does not refer to occasional compliments or other statements of a socially acceptable nature. Harassment refers to behavior which is unwelcome and which is offensive and/or persistent enough to create, or has the potential of creating an intimidating, hostile or offensive working environment for any employee.

Harassment includes unwelcome sexual advances or requests for sexual favors, unwelcome touching of a sexual nature and unwelcome and/or offensive sexual comments.

3. This policy applies to all full-time, part-time, permanent, and temporary employees, including supervisors and department heads, as well as to volunteers.
4. It is a violation of this policy to use an individual's submission to or rejection of harassing conduct as the basis for any employment decision affecting the individual.
5. An employee who believes she, he or they have been subjected to harassment as defined in this policy shall promptly report the harassment to her, his or their supervisor and/or the director of human resources or designee. _____(company name) will make reasonable efforts to insure that a human resources representative of each sex is available to receive such complaints. The human resources department shall conduct a thorough and prompt investigation and, if appropriate, take disciplinary action against any offender, including but not limited to discharge. Staff will keep the complaint as confidential as reasonably possible. No one will be retaliated against for filing a harassment complaint.
6. All supervisory personnel who observe or otherwise learn of or have reason to suspect any conduct, which may violate this policy, shall promptly report such facts to the director of human resources or designee, and shall cooperate fully in any investigation or disciplinary action undertaken pursuant to this policy. Failure to comply with this section shall be grounds for appropriate disciplinary action, up to and including termination.

7. _____ (company name) will provide regular training to employees and supervisors on the subject of harassment in the workplace. We will include information about this policy in our orientation and in our personnel policy. A copy of this policy will be posted on a prominent bulletin board. We take this matter seriously and will do all that is reasonably necessary to maintain a harassment-free workplace for our employees.

Signature

Date

AFFIRMATIVE ACTION PLAN AND HARASSMENT POLICY CHECKLIST

Company Name: _____

Effective Date: _____

NOTE: This is not an Affirmative Action Plan

Contractor: Plan MUST Include:	Yes	No	Comments:
Policy statement of equal employment opportunity	<input type="checkbox"/>	<input type="checkbox"/>	
Covers:			
Applicants for employment	<input type="checkbox"/>	<input type="checkbox"/>	
Employees	<input type="checkbox"/>	<input type="checkbox"/>	
On basis of:			
Race	<input type="checkbox"/>	<input type="checkbox"/>	
Religion	<input type="checkbox"/>	<input type="checkbox"/>	
Color	<input type="checkbox"/>	<input type="checkbox"/>	
Sex	<input type="checkbox"/>	<input type="checkbox"/>	
National Origin	<input type="checkbox"/>	<input type="checkbox"/>	
Ancestry	<input type="checkbox"/>	<input type="checkbox"/>	
Disability	<input type="checkbox"/>	<input type="checkbox"/>	
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	
Gender Identity	<input type="checkbox"/>	<input type="checkbox"/>	
Veteran Status	<input type="checkbox"/>	<input type="checkbox"/>	
Housing Status	<input type="checkbox"/>	<input type="checkbox"/>	
Designates a person responsible for implementation of the Plan	<input type="checkbox"/>	<input type="checkbox"/>	
Provides for communication of the policy:			
Within the Organization	<input type="checkbox"/>	<input type="checkbox"/>	
Outside the Organization	<input type="checkbox"/>	<input type="checkbox"/>	
(e.g., recruitment sources, unions)			
Applies to all terms and conditions of employment (e.g., hiring, placement, promotion, duties, wages, benefits, use of facilities, layoff, discipline, termination)	<input type="checkbox"/>	<input type="checkbox"/>	
Provision for: Recruitment from minority groups	<input type="checkbox"/>	<input type="checkbox"/>	
Provision for: Equal access to training programs	<input type="checkbox"/>	<input type="checkbox"/>	
Grievance Procedure	<input type="checkbox"/>	<input type="checkbox"/>	
Prohibits retaliation for filing grievances	<input type="checkbox"/>	<input type="checkbox"/>	
Workforce Breakdown	<input type="checkbox"/>	<input type="checkbox"/>	

(figures up to date within 6 months)

HARASSMENT POLICY CHECKLIST

Definition of harassment	<input type="checkbox"/>	<input type="checkbox"/>
Designates a person to receive and Investigate harassment complaints	<input type="checkbox"/>	<input type="checkbox"/>
Prohibits retaliation for filing a harassment complaint	<input type="checkbox"/>	<input type="checkbox"/>

WORKFORCE BREAKDOWN FORM

COMPANY NAME: _____

ADDRESS: _____

REPRESENTATIVE: _____

PHONE: _____

E-MAIL ADDRESS: _____

Position, Title Class or Category	Total Number Employees in Each Position	Total Number Minority Employees	Percent of Total	Total Number Female Employees	Percent of Total	Total Number Employees with Disabilities	Percent of Total

I swear or affirm under penalties of perjury that this workforce breakdown is accurate, to the best of my knowledge.

Signature and Title of Representative:

Date:

"AFFIDAVIT"

EXHIBIT C

STATE OF _____)
) SS:
COUNTY OF _____)

E-VERIFY AFFIDAVIT

The undersigned, being duly sworn, hereby affirms and says that:

1. The undersigned is the _____ of _____.
 - a. (job title) (company name)
2. The company named herein that employs the undersigned:
 - i. has contracted with or seeking to contract with the City of Bloomington to provide services; **OR**
 - ii. is a subcontractor on a contract to provide services to the City of Bloomington.
3. The undersigned hereby states that, to the best of his/her knowledge and belief, the company named herein does not knowingly employ an "unauthorized alien," as defined at 8 United States Code 1324a(h)(3).
4. The undersigned hereby states that, to the best of his/her belief, the company named herein is enrolled in and participates in the E-verify program.

Signature

Printed Name

STATE OF _____)
) SS:
COUNTY OF _____)

Before me, a Notary Public in and for said County and State, personally appeared _____ and acknowledged the execution of the foregoing this _____ day of _____, 20____.

Notary Public's Signature

Printed Name of Notary Public

My Commission Expires: _____

County of Residence: _____

NON-COLLUSION AFFIDAVIT

The undersigned offer or agent, being duly sworn on oath, says that he has not, nor has any other member, representative, or agent of the firm, company, corporation or partnership represented by him, entered into any combination, collusion or agreement with any person relative to the price to be offered by any person nor to prevent any person from making an offer nor to induce anyone to refrain from making an offer and that this offer is made without reference to any other offer.

OATH AND AFFIRMATION

I affirm under the penalties of perjury that the foregoing facts and information are true and correct to the best of my knowledge and belief.

Dated this _____ day of _____, 20____.

(Name of Organization)

By: _____

(Name and Title of Person Signing)

STATE OF _____)

) SS:

COUNTY OF _____)

Subscribed and sworn to before me this ____ day of _____
20__.

My Commission Expires:

Notary Public Signature

Resident of _____ County

Printed Name