Responsible Bidder Checklist KDOT

To be completed by Contractor/Subcontractor

Project:	Contract Number:	
Business Name: Business Address: Contact Person: Fax:	Phone: E-mail:	
For Office Use Only		
Evidence of prequalification through	n the Illinois Department of Transportation	Yes [] No []
Evidence of (i) participation in appli	cable registered apprenticeship programs	Yes [] No []
and (ii) evidence that each program	has met the graduation requirement	Yes [] No []
Contractor's verification of complian	nce with the requirements of	
Kane County Ordinance No. 23-340).	Yes [] No []
Each Sub-Contractor's verification of	of compliance with the requirements of	
Kane County Ordinance No. 23-340		Yes [] No []

RESPONSIBLE BIDDER REPRESENTATIONS

Contractor and all subcontractors shall complete this Responsible Bidder Representations Form ("Form") and submit supporting documentation as required pursuant to Kane County Ordinance No. 23-340. Contractor must submit this Form and all supporting documentation with its bid. Contractor shall be responsible for providing this Form to all subcontractors who will perform work on the project. All subcontractors' Forms and supporting documentation must be submitted to the Kane County Division of Transportation (KDOT) prior to commencing work on the project. Failure to comply with all submission requirements set forth in Kane County Ordinance No. 23-340 is grounds for KDOT to determine that a submission is incomplete, which may result in a determination that Contractor is not a responsible bidder.

For the remainder of this Form, "Contractor" refers to the general contractor and all subcontractors. Each item must be answered. If the question is not applicable, answer "NA." If the answer is none, answer "none."

The certifications set forth in this Form and all documents attached hereto shall become a part of any contract awarded to the Contractor. Furthermore, Contractor shall comply with these certifications during the term and/or performance of the contract.

The undersigned		, as		and on behalf
	(Name)	,	(Title)	
of		certifies that:	,	
(Cont	ractor)			
Illinois Department	of Transportation Pr	equalification		
	ll of the conditions req et forth by the Illinois I			Yes [] No []
Registered Apprent	iceship Programs			
and registered with the	es in apprenticeship tra ne United States Depar perform on the project:		•	Yes[] No[]
	the requirement that a entices in each of the pa		ed	Yes [] No []

Subcontractors

Contractor has or will disclose the name and address of each subcontractor for whom the contractor has accepted a bid and/or intends to hire on any part of the project (Form A):

Yes [] No []

Contractor has or will provide a Form to all of the above-referenced subcontractors:

Yes []No []

Table A

Subcontractors who are anticipated to perform work on the Project

Name	Address	Work to be Performed

	_
	-
Contract No.	
contract ino.	

Table A:	Name and address of subcontractors from whom Contractor has accepted a bid or intends to hire to perform work on any part of the project. NOTE: All subcontractors shall complete and submit an Affidavit o Compliance no later than the date the subcontractor commences work or the project.
Evidence	of Prequalification through the Illinois Department of Transportation
	of Prequalification through the Illinois Department of Transportation of participation is applicable registered apprenticeship programs

CONTRACTOR VERIFICATION

I certify that I am authorized to execute this Contractor Verification on behalf of the Contractor set forth on page one (1), that I have personal knowledge of all the information set forth herein, and that all statements, representations, information and documents provided in or with this Form and attachments hereto are true and accurate and are submitted in compliance with the requirements of Kane County Ordinance No. 23-340. Failure to comply with all submission requirements set forth in Kane County Ordinance No. 23-340 is grounds for the County of Kane to determine that a submission is incomplete, which may result in a determination that Contractor is not a responsible bidder.

The Contractor shall report any change in any of the facts stated in this Form within fourteen (14) days of the effective date of such change by completing and submitting a new Form. Failure to comply with this requirement is grounds for the Contractor to be deemed a non-responsible bidder.

	Signature of Authorized Officer	
	Name of Authorized Officer (Print or Type)	
	Title	
	Telephone Number	
Subscribed and sworn to		
before me this day of, 20		
Notary Public Signature & Seal		

SUBCONTRACTOR VERIFICATION

I certify that I am authorized to execute this Subcontractor Verification on behalf of the Subcontractor set forth on page one (1), that I have personal knowledge of all the information set forth herein and that all statements, representations, information and documents provided in or with this Form and attachments hereto are true and accurate and are submitted in compliance with the requirements of Kane County Ordinance No. 23-340.

The Subcontractor shall report any change in any of the facts stated in this Form within fourteen (14) days of the effective date of such change by completing and submitting a new Affidavit. Failure to comply with this requirement is grounds for the project owner to withhold payment due for work performed.

	Signature of Authorized Officer
	Name of Authorized Officer (Print or Type)
	Title
	Telephone Number
Subscribed and sworn to	
before me this day of, 20	
Notary Public Signature & Seal	