

Proposer Questionnaire

Proposer Name/Title: _____

Proposer Contact Info (address, phone, email): _____

Date: _____

Entity Federal Tax Identification Number: _____

Is Entity a: Corporation (Y) (N) Partnership (Y) (N) Sole Proprietor (Y) (N)

Year Entity Was Established: _____

Current Locations and Operating Hours: _____

Have you ever had a prior relationship with CATA as a vendor, employee, contractor, etc? (Yes) (No). If so, please elaborate

Does any family member or related party work for your company or a company that will be providing services to CATA? A proposer is required to disclose any "Related Party" that it may seek to use, engage, employ or compensate, and receive reimbursement outside the fixed management fee during the contract period. (Yes) (No). If so, please elaborate

Have you or any of the Business Entity Owners in this endeavor ever been convicted for violations of federal, State, or local laws? (Yes) (No). If so, please elaborate

Have you, the Entity, or any of the Entity owners ever filed for bankruptcy (Yes) (No) If so, please elaborate _____

Are there any pending or recent law suits against the Entity, you, or the Entity Owners? (Yes) (No). If so, please elaborate _____

Has your firm, a director, or an officer engaged in a lawsuit against any former or current client?
If so, please list the client and the date of the suit.

I CERTIFY THAT THE STATEMENTS INCLUDED WITHIN THIS PROPOSAL AND ANY ATTACHMENTS ARE TRUE. I AUTHORIZE CATA TO OBTAIN CREDIT INFORMATION FROM MY BANK, INSURANCE AGENCY, AND CREDIT REFERENCES.

Applicant's Signature

Date

To Whom It May Concern:

I, the undersigned, hereby authorize release to CATA of any and all credit information concerning the individual, business, or organization listed below.

Signature of Applicant

Printed Name of Applicant

Title of Applicant

Print Entity Name

By: _____

Print Name: _____

Title: _____

Date: _____