REPRESENTATIONS AND CERTIFICATIONS

The respondent is requested to check the appropriate boxes making the Representations and Certifications of the project a formal part of its pre-qualification. Failure to provide this information will prevent your company from being pre-qualified.

1. **Small Business and Small Disadvantaged Business Contracting Program**. Pursuant to the terms of our Agreement with the Government and applicable Federal Procurement Regulations 1-1.701, AURA is required to maintain a Small Business and Small Disadvantaged Business Subcontracting Program. Check Business Size as Small or Large as defined. Check as many that apply under the Business Classification. Check one under Business Status, for IRS reporting requirements.

2. **Debarment/Suspension Status** Contractor is required to read and certify the understanding of the debarment procedure and process.

3. **Qualification of Corporate Signature**
   Signature of the qualified person authorized, empowered, and directed on behalf of the Contractor to make and execute proposals, offers, and contracts is required.

4. **Qualification of Limited Liability Company Signature**
   Signature of the qualified person authorized, empowered, and directed on behalf of the Contractor to make and execute proposals, offers, and contracts is required.

5. **Certification that no Conflict of Interest Exists**
   The Contractor is required to read and certify that no organizational conflict of interest exists as defined in the certification form.

6. **Identification Numbers**. Enter appropriate UEI Number and Firms Tax ID Number.

7. **Declarations**
   Signature and Date: Signature and Date of Contractor's officer to attest that the information contained in the Proposal Documents is true and correct and to confirm that the Contractor understands its statements in the Proposal Documents are subject to investigation and that dishonest answers may be grounds for disqualification and may subject the Contractor and its representative to criminal and civil liability.

1. CERTIFICATION OF SMALL BUSINESS/SMALL DISADVANTAGE BUSINESS CONTRACTING PROGRAM

AURA maintains a "Small Business" and a "Small Disadvantaged Business" Contracting Program. Please check the appropriate circles below.

Business Size (check one)

○ Small	A domestic concern that is independently owned and operated, is not dominant in the field of its operations, qualifies under the criteria covering annual receipts set forth in Section 3 of the Small Business Act and does not employ more than 500 employees.
○ Large	A domestic concern which, including domestic and foreign divisions and affiliates, normally employs 500 or more persons, is independently or publicly owned or controlled and operated, and which may be division of another domestic or foreign concern.

Business Classification (check as many as are applicable)

○ Minority	51% of business is owned by one or more socially and economically-disadvantaged individuals and whose management and daily business operations are controlled by one or more of such individuals. Socially and economically disadvantaged individuals including, Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Asian-Indian Americans, and other minorities, or any other individual found to be disadvantages pursuant to Section 8(a) of the Small Business Act. Native Americans include American Indians, Eskimos, Aleuts, and Native Hawaiians. Asian-Pacific Americans include United States citizens whose origins are Guam, the U.S. Trust Territories of the Pacific, Northern Marianas, Laos, Cambodia, and Taiwan.

For assistance in determining your business size and socially and economically disadvantaged status, contact the nearest office of the Small Business Administration.

○ Women-Owned	A business that is at least 51% owned, controlled and operated by a woman or women. **Note: "**Controlled" is defined as exercising the power to make policy decisions. "Operated" is defined as actively involved in the day-to-day management.
○ Non-Profit	A business or organization that has received non-profit status under IRS Regulation 501(c)(3).
○ Public	An agency of the Federal or State Government Sector or a municipality.
○ Sheltered	A sheltered workshop or other equivalent business basically employing the handicapped.
○ Handicapped	A business that is owned, controlled, and operated by a handicapped person(s).
○ Foreign	A concern which is not incorporated in the United Stated or an unincorporated concern having its principal place of business outside the United States.

Business Status (check one) – For IRS Reporting Requirements

○ Corporation	A business entity that is registered with a state in the United States as a corporation, including non-profit corporations but excluding professional corporations
○ Other	An individual or other business entity, that is not a registered corporation. This includes limited liability companies, partnerships, limited partnerships, limited liability partnerships, independent contractors, and the like.

2. CERTIFICATION OF DEBARMENT/SUSPENSION STATUS

Contractor certifies to the best of its knowledge and belief that it and its principals:

A. are not presently debarred, suspended proposed for debarment, declared ineligible, or voluntarily excluded from a covered transaction by any Federal department or agency;
B. have not within a three year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state or local) transaction or contract under a public transaction; violation of Federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
C. are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, State or local) with commission of any of the offenses enumerated in paragraph b of this certification; and
D. have not within a three-year period preceding this proposal had one or more public transactions (Federal, state or local) terminated for cause or default.

The Contractor agrees to provide immediate notice to the AURA Contracting Officer in the event of being suspended, debarred, or declared ineligible by any department or Federal Agency, or upon receipt of a notice of proposed debarment that is received after the submission of the proposal or offer, but prior to the award of the purchase order or contract.

CERTIFICATION

The Contractor hereby certifies that he or she has read the above Debarment/Suspension Status requirements and that he or she understands and will comply with these requirements.

Please advise this facility as soon as possible when the status of your company changes from that indicated above.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: _____

DATE SIGNED: _____

NAME AND TITLE OF SIGNER (PRINT OR TYPE): _____

ADDRESS: _____

3. QUALIFICATION OF CORPORATE SIGNATURE

(To be completed if Contractor is a corporation.)

[INSERT CORPORATION NAME] incorporated in the state (country) of [INSERT STATE AND COUNTRY], RESOLVE THAT: [INSERT NAME AND TITLE] of this corporation is hereby authorized, empowered and directed, for and on behalf of this corporation and its corporate name, to make and execute proposals, offers and contracts binding upon this corporation for supplies and services required or rendered by this corporation in the course of this business in an amount up to: [INSERT ALFA DOLLAR AMOUNT] DOLLARS ($INSERT NUMERICAL DOLLAR AMOUNT).

CERTIFICATION

I hereby certify that I am a duly elected and qualified [INSERT TITLE], of the corporation, that the foregoing is a true and correct statement of a resolution adopted at a meeting of the Board of Directors of said corporation, and that the foregoing resolution is in full force and effect and has not been repealed, amended, or canceled.

CERTIFICATION

I hereby certify that I am a/the duly elected and qualified _____, of the above named corporation, that the forgoing is a true and correct statement of a resolution adopted at a meeting of the Board of Directors of said corporation, and that the foregoing resolution is in full force and effect, and has not been withdrawn, repealed, amended, or canceled.

IN WITNESS WHEREOF I have hereto set my hand on behalf of said corporation.

SIGNATURE OF OFFICER: _____

DATE SIGNED: _____

NAME AND TITLE OF SIGNER (PRINT OR TYPE): _____

ADDRESS: _____

4. QUALIFICATION OF LIMITED LIABILITY COMPANY SIGNATURE

(To be completed if Contractor is a limited liability company.)

[INSERT LIMITED LIABILITY NAME] organized in the state (country) of [INSERT STATE AND COUNTRY], RESOLVE THAT: [INSERT NAME AND TITLE], of this limited liability company is hereby authorized, empowered and directed, for and on behalf of this corporation and this limited liability company and its limited liability name, to make and execute proposals, offers and contracts binding upon this limited liability company for supplies and services required or rendered by this limited liability company in the course of this business in an amount up to: [INSERT ALFA DOLLAR AMOUNT] DOLLARS ($INSERT NUMERICAL DOLLAR AMOUNT).

CERTIFICATION

I hereby certify that I am (i) a member or (ii) a/the duly elected and qualified/appointed _____ _____, of the above named limited liability company, that the forgoing is a true and correct statement of a resolution adopted at a meeting of the members/managers of said limited liability company, and that the foregoing resolution is in full force and effect, and has not been withdrawn, repealed, amended, or canceled.

IN WITNESS WHEREOF, I have hereto set my hand on behalf of said limited liability company.

_____

SIGNATURE OF AUTHORIZED OFFICER/MEMBER/REPRESENTATIVE

_____

PRINTED NAME AND TITLE

_____

DATE

_____

ADDRESS

5. CONFLICTS OF INTEREST CERTIFICATION

(a) Contractor warrants that to the best of its knowledge and belief, and except as otherwise disclosed, it does not have any organizational conflict of interest which is defined as a situation in which the nature of work under a proposed contract and the prospective contractor's organizational, financial, contractual or other interest are such that:

(i) award of the contract may result in or be the result of an unfair competitive advantage;
(ii) the Contractor's objectivity in performing the contract work may be impaired; or
(iii) that the Contractor has disclosed all relevant information and requested AURA to make a determination with respect to this Contract.

(b) Contractor agrees that if, after award, it discovers an organizational conflict of interest with respect to this Contract, it shall make an immediate and full disclosure in writing to the AURA Contracts Officer which shall include a description of the action which the Contractor has taken or intends to take to eliminate or neutralize the conflict. The AURA Contracts Officer may, however, terminate the contract for the convenience of AURA, if it would be in the best interests of AURA to do so.

(c) In the event the Contractor was aware of an organizational conflict of interest before the award of this contract and intentionally did not disclose the conflict to the AURA Contracts Officer, the Contracts Officer may terminate the Contract for default.

(d) Contractor shall require a conflict of interest disclosure or representation from subcontractors and consultants who may be in a position to influence the advice or assistance rendered to AURA and shall include any necessary provisions to eliminate or neutralize conflicts of interest in such consultant agreements or subcontracts involving performance or work under this Contract.

I declare under penalty of perjury that all statements and information contained in this document and any accompanying documents are true and correct, with full knowledge that all statements made in this document and any accompanying documents are subject to investigation and that any false or dishonest answer to any question may be grounds for disqualification from this solicitation or termination of any award and expose me and the represented organization to both civil and criminal liability.

_____

SIGNATURE OF AUTHORIZED OFFICER/MEMBER/REPRESENTATIVE

_____

PRINTED NAME AND TITLE

_____

DATE

6. IDENTIFICATION NUMBERS: UEI No. _____

Tax ID No. _____

Failure to provide this information will prevent Firm from being considered for the work covered by this RFP.

7. DECLARATION

I declare under penalty of perjury that all statements and information contained in this document and any accompanying documents are true and correct, with full knowledge that all statements made in this document any accompanying documents are subject to investigation and that any false or dishonest answer to any question may be grounds for disqualification from this solicitation and expose me and the represented organization to both civil and criminal liability.

_____

SIGNATURE OF AUTHORIZED OFFICER/MEMBER/REPRESENTATIVE

_____

PRINTED NAME AND TITLE

_____

DATE