

## VENDOR INFORMATION

Vendor Name: \_\_\_\_\_

<input type="checkbox"/>	<b>By checking this box, I, AUTHORIZED REPRESENTATIVE for VENDOR NAME, represent that I am authorized to and do bind the vendor to this response. I certify that all of the information provided herein is true and accurate, to the best of my knowledge. I understand that the discovery of deliberately misrepresented information contained herein may constitute grounds for contract termination and removal from the vendor pool.</b>
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## GENERAL INSTRUCTIONS

Vendors must use the template set out herein for submission of their response to a TOPS Request Form. Modifications to the format of this template (e.g., altering font size, altering font type, adding colors, adding pictures etc) will cause your response to be rejected.

**Please list your experience in the following Categories: Project Approach, Risk Assessment, and Experience/Qualifications.**

## PROJECT APPROACH

Provide a concise and detailed summary of your approach to delivering the services described in the TOPS Request Form. The summary must demonstrate your understanding of how to successfully complete the work in a way that meets the State's needs.

**Project Approach cannot exceed one page.**

## RISK ASSESSMENT

Itemize potential **controllable** and **non-controllable** risks associated with providing the services described in the TOPS Request Form and concisely describe how you will mitigate each risk.

**Risks cannot exceed one page. You may add/delete additional rows to identify additional risks and solutions, but do not exceed the page limit. Do not include any cost or marketing information.**

## EXPERIENCE/QUALIFICATIONS

Describe your experience and qualifications specifically as they pertain to the services described in the TOPS Request Form. If applicable, please provide your responses to Special Expertise & Experience, and Special Considerations or Constraints areas. Your response may include prior experience, engagements, and/or past performances relative to the department needs and/or requirements as they pertain to the TOPS Request Form in these sections.

**Experience/Qualifications cannot exceed two pages.**

**PROJECT APPROACH**

**BEST VALUE PROCESS ONLY:** EVALUATOR NAME:

SCORE: 10 5 0

Provide a concise and detailed summary of your approach to delivering the services described in the TOPS Request Form. The summary must demonstrate your understanding of how to successfully complete the work in a way that meets the state's needs.

**RISK ASSESSMENT**

**BEST VALUE PROCESS ONLY:** EVALUATOR NAME:

SCORE: 10 5 0

Itemize each potential risk, describe why it is a risk, and describe how you will mitigate it. Use the following format in your response: Risk/Why it is a risk/Your solution. Use paragraphs to separate each risk identified.

**EXPERIENCE/QUALIFICATIONS**

**BEST VALUE PROCESS ONLY:** EVALUATOR NAME:

SCORE: 10 5 0

Describe your experience and qualifications as they pertain to the services described in the TOPS Request Form.

**EXPERIENCE/QUALIFICATIONS (CONT.)**

Describe your experience and qualifications as they pertain to the services described in the TOPS Request Form.

**EVALUATOR NON-CONFLICT OF INTEREST STATEMENT**

By checking this box, I certify that neither I, \_\_\_\_\_, nor any member of my immediate family has a material personal or financial relationship with this vendor or to a direct competitor of this vendor. I further certify that no other relationship, bias or ethical conflict exists which will prevent me from evaluating this response solely on its merits and in accordance with the evaluation criteria.

Furthermore, I agree to notify the Task Order Manager if my personal or financial relationship with this vendor is altered at any time during the evaluation process. If I am serving as the Procurement Officer of record I agree to advise my supervisor of any changes that could appear to represent a conflict of interest.

**EVALUATOR NOTES**

To be completed by requesting agency evaluator(s).

Comments **MUST** be recorded for any section receiving a Best Value score of 10 or 0. Comments must be concise and objective and refer to or quote the portion of the response that led to the score.

<b>PROJECT APPROACH</b>

<b>RISK ASSESSMENT</b>

<b>EXPERIENCE/QUALIFICATIONS</b>