

#### INSTRUCTIONS

- This Questionnaire shall be completed on behalf of the Firm by an individual who is knowledgeable about the past and present operations of the firm and its policies.
- · Firms intending to bid as joint venturers should submit a separate Questionnaire for each joint venturer.
- . Whenever more space is needed to answer any question, or you wish to give further explanation, complete by attaching extra pages.
- All questions must be answered. If a particular question does not apply, the response must state "Not Applicable" ("NA").
- · Any suits, liens, judgments, litigation, violations, and administrative or court actions under appeal must be disclosed.

**NOTE:** Please indicate whether you believe that any of the information supplied herein is confidential and should be exempt from disclosure under the New York Freedom of Information Law: \_\_\_\_\_yes, \_\_\_\_\_no. If you checked "yes" you must identify the information you feel is confidential by placing an asterisk in front of the appropriate question number(s) and attach an additional sheet(s) explaining the basis for such claim(s).

### **DEFINITIONS**

For purposes of this Questionnaire, the following terms shall have the following meanings:

- A. "Affiliate" shall mean any person or entity that is directly or indirectly controlled by the person or entity to which the question relates, or any person or entity that directly or indirectly controls such person or entity. For purposes of this definition, control means the power to direct the management of the firm, person or other entity, whether through ownership of shares, the right to designate the Board of Directors, contract or otherwise.
- B. "Principal" shall mean any person who is or has been, within the past five (5) years, either an owner of five percent (5%) or more of the firm's shares, one of the firm's five (5) largest shareholders or a director, officer, partner or proprietor of the Firm.
- C. "Key Person" shall mean any individual, not identified in this Questionnaire as a Principal, who participates in policy making, financial decisions, or the Firm's operations in relation to the LMDC project.

### **GENERAL INFORMATION**

1.	LEGAL NAME OF FIRM (hereafter, the "Firm")					
DBA NAME, IF ANY						
	AILING ADDRESSPHONE NO. ()					
	COUNTYSTATEZIPFAX NO. ()					
	CTUAL LOCATION					
FIRM HEADQUARTERS (if different)						
	-MAIL ADDRESSWEB SITE					
2.	ONTACT NAME FOR QUESTIONNAIRETITLEPHONE NO	_				
3.	YPE OF FIRM (check only one)CORPORATIONPARTNERSHIPPROPRIETORSHIPJOINT VENTURELLCLLP					
4.	OW MANY YEARS HAS THE FIRM BEEN IN BUSINESS?UNDER THE SAME NAME?FORMER NAME(S):					
4a.	AS THE FIRM PURCHASED AS AN EXISTING BUSINESS BY ITS PRESENT OWNER(S) NO YES(IF YES PROVIDE INFORMATION)  ATE PURCHASED// PREVIOUS OWNER(S) NAME(S):	_				
5.	WHAT IS THE FIRM'S BONDING RANGE? \$SINGLE PROJECT \$AGGREGATE (ALL PROJECTS)					
6.	RE YOU CERTIFIED MBE WBE IF SO, BY WHOM?	_				

# OWNERSHIP, MANAGEMENT, AFFILIATION

7. **Principals**: Identify each person who is, or has been within the past five (5) years, an owner of five percent (5.0%) or more of the Firm's shares, or one of the five (5) largest shareholders or a director, an officer, a partner or a proprietor. Fill in name, % owned, office held and indicate by Y or N whether the individual is a director, officer, partner or Key Person:

FIRST NAME	MI	LAST NAME	DATE OF BIRTH	% OWNED	DIRECTOR (Y OR N)	OFFICER (Y OR N)	TITLE	PARTNER (Y OR N)	KEY PERSON (Y OR N)

8. **Key Persons**: Identify any individual, not listed in your answers to question 7 and identified as a Principal, who participates in policy making, financial decisions or the Firm's operations in relation to the LMDC project:

MI	LAST NAME	DATE OF BIRTH	TITLE
	MI	MI LAST NAME	MI LAST NAME DATE OF BIRTH

9. **Ownership of Other Firms:** Identify any other firms in which, now or in the past five (5) years, the Firm or any Principals or Key Persons, either owned or owns five percent (5.0%) or more of the shares of, or was or is one of the five (5) largest shareholders, a director, officer, partner or proprietor of such other firm:

FEDERAL ID NO.	% OWNED	FIRM/COMPANY NAME	FIRM/COMPANY ADDRESS

Rev. 2/03/03 Page 2 of 6

FEDERAL ID NO.	COMPANY NAME		ADDRESS	
Identify the name and types and provide the information	of any professional or occupational license(sbelow.	s) (e.g., attorney, CPA, architect, engineer, secu	urities, insurance, etc.) ever held	d by the Firm, Principal or Key
TYPE OF LICENSE	LICENSING AUTHORITY	INDIVIDUAL NAMED ON LICENSE	LICENSE NUMBER	DATE HELD FROM (MO/YR TO MO/
(a) Present or past employ	your answers to questions 7, 8, or 10:  yees of the LMDC No Yes narriages to any present or past employees	of the LMDC? No Yes		
ou answered "yes" to question	s 12(a) or 12(b), provide name(s) of such ind	lividual(s) and indicate his or her relationship to	the current/former LMDC emplo	oyee.

13. Attach a copy of the Firm's most recent audited annual financial statement, include (if any) the auditor's report and accompanying footnotes.

14. For the purpose of this contract, is any other person or entity guaranteeing the performance of, or otherwise providing financial assistance to, your Firm? If so, describe the form of assistance and list the name(s) and federal tax identification number(s) ("TIN") of each person or entity:

FORM OF ASSISTANCE	INDIVIDUAL	COMPANY NAME	FEDERAL TIN	ADDRESS

# OTHER INFORMATION

15. For the Firm or any individual, firm or Affiliate identified in questions 7 through 10 above; (a) list and describe all judgments, liens or claims over \$25,000 filed against the Firm, individual, firm or Affiliate and remaining undischarged or unsatisfied for more than ninety (90) days; and (b) list and describe all liquidated damages assessed. Also list any litigation currently pending against the Firm, individual, firm, or Affiliate, if the judgment sought relates to the type of work to be performed for the LMDC, or could have a material adverse financial impact on the Firm, individual, firm or Affiliate.

LIENS, CLAIMS, LITIGATION INDEX/DOCKET NO.	LIQUIDATED DAMAGES
	LIENS, CLAIMS, LITIGATION INDEX/DOCKET NO.

Rev. 2/03/03 Page 4 of 6

16.		in the past five (5) years has the Firm, Principal, Key Person, or Affiliate been the subject of any of the following (respond to each question and descri n affirmative answer; attach additional pages if necessary):	be in detail th	ne circumstances of
	(a)	a judgment of conviction for any business-related conduct constituting a crime under state or Federal law?	No	Yes
	(b)	a criminal investigation or indictment for any business-related conduct constituting a crime under state or Federal law?	No	Yes
	(c)	a grant of immunity for any business-related conduct constituting a crime under state or Federal law?	No	Yes
	(d)	any felony or misdemeanor charges pending that were filed either before or during their employment or affiliation with the Firm?	No	Yes
	(e)	a Federal or state suspension or debarment?	No	Yes
	(f)	a finding of non-responsibility by any government agency?	No	Yes
	(g)	a denial or revocation of prequalification?	No	Yes
	(h)	a voluntary exclusion from bidding/contracting agreement?	No	Yes
	(i)	any administrative or civil action seeking specific performance or restitution on any public works contract except any disputed work proceeding?	No	Yes
	(j)	an OSHA Citation and Notification of Penalty containing a violation classified as serious?	No	Yes
	(k)	an OSHA Citation and Notification of Penalty containing a violation classified as willful?	No	Yes
	(I)	a prevailing wage or supplement payment violation?	No	Yes
	(m)	a state labor law violation deemed willful?	No	Yes
	(n)	any other federal or state citations, notices, violation orders, pending administrative hearings or proceedings or determinations of a violation of any labor law or regulation?	No	Yes
	(o)	any criminal investigation, felony indictment or conviction concerning formation of, or any business association with, any allegedly false or fraudulent women's, minority or disadvantaged business enterprise?	No	Yes
	(p)	any denial, decertification, revocation or forfeiture of Women's Business Enterprise, Minority Business Enterprise or Disadvantaged Business Enterprise status?	No	Yes
	(q)	rejection of a low bid on a local, state or federal contract for failure to meet statutory affirmative action or MWBE requirements?	No	Yes
	(r)	consent order with the NYS Department of Environmental Conservation, or a federal, state or local government enforcement determination involving a violation of federal or state environmental laws?	No	_ Yes
	(s)	<ul> <li>any citations, notices, violation orders, pending administrative hearings or proceedings or determinations for violations of:</li> <li>Federal, state or local health laws, rules or regulations?</li> <li>Federal, state or local environmental laws, rules or regulations?</li> <li>unemployment insurance or workers compensation coverage or claim requirements?</li> <li>ERISA (Employee Retirement Income Security Act)?</li> <li>Federal, state or local human rights laws?</li> <li>Federal or state security laws?</li> <li>a request to withdraw a bid submitted to a public owner or any claim of an error on a bid submitted to a public owner?</li> </ul>	No No No No	
	(t)	any bankruptcy or reorganization proceeding?	No	_Yes
	(u)	any suspension or revocation of any business or professional license, certificates or certifications?	No	_ Yes
	(v)	a denial of application an for a professional or trade license?	No	_ Yes

Rev. 2/03/03 Page 5 of 6

17. Within the past five (5) years has the Firm, Principal, or Key Person (respond to each question and detail the circumstances of each affirmative answer; attach addition				
	(a)	filed or submitted to any government agency, employee or representative any document that the Firm, Affilia knew to contain a false statement or false information?	te, Principal or Key Person	No Yes
	(b)	falsified any business record?		No Yes
	(c)	given or offered to give money or any thing of value or any benefit to any labor official or public servant with influence that person with respect to his or her official acts, duties or decisions as a labor official or public servant.		No Yes
	(d)	given or offered to give money or any thing of value or any benefit to any official or employee of a business v to induce that person or employee to engage in unethical or illegal business practices?	vith intent	No Yes
	(e)	agreed with any person to submit a proposal, price or bid below prevailing market rate?		No Yes
	(f)	been sued or paid a settlement of claim related to the performance of professional services?		No Yes
18.	With	in the past five (5) years, has the Firm ever:		
	(a)	failed to file any required tax returns or failed to pay any applicable Federal, state or New York City taxes, or charges including, but not limited to, water and sewer charges?	other assessed New York City	No Yes
	(b)	had, or does it presently have, any delinquent Federal, state or New York City taxes outstanding?		No Yes
	If yo	u answered "yes" to questions 18(a) or 18(b), supply details.		
19.	Prov	vide any supplemental information the Firm desires to have considered as part of its response to this Question	naire.	
The LMI Hou ack Sec info	unde DC maising nowled tion 2 rmation	CATION  Persigned recognizes that this Questionnaire is submitted for the express purpose of inducing the LMDC ay in its discretion, by means which it may choose, determine the truth and accuracy of all statements rand Urban Development, or their agents to contact any entity named in this Questionnaire and any attaction the intentional submission of false or misleading information may constitute a felony under National submission of the punishable by a fine of up to \$10,000 or imprisonment of up to submitted in this Questionnaire and any attached pages is true, accurate and complete.  The provided HTML is a submission of the provided HTML is a submitted in this Questionnaire and any attached pages is true, accurate and complete.	made herein; authorizes the LMDC, the U chments for the purposes of verifying the ew York Penal Law Section 210.40 or a r	Inited States Department of information supplied; misdemeanor under Penal Law
			Signature of Officer	
Not	ary P	ublic	Title	
Cor	nmiss	sion Expiration Date		

Rev. 2/03/03 Page 6 of 6