RFP No.: RFP-FS-2022-15-KO

RFP Title: ID/IQ Environmental Health and Safety Consulting Services

## ATTACHMENT L

# **DVBE DECLARATION**

## SECTION 1. MUST BE COMPLETED BY ALL DVBEs

	oled Veteran Business Enterprise (DVBE) name: _ Supplier ID number:		
SEC	ΓΙΟΝ 2. MUST BE COMPLETED BY ALL D	VBEs	
	k only one box in Section 2 <u>and</u> provide original s rs and managers of the DVBE.	ignatures of all disabled veteran (DV)	
	I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code (MVC) section 999.2(b), of the goods and/or services provided by the DVBE in connection with the solicitation identified above.		
	Pursuant to MVC 999.2(f), I (we) declare that the DVBE is a broker or agent for the following principal. (attach additional sheets if more than one principal)  Principal Name: Principal Phone:  Principal Address:		
Disab	oled veteran <u>owners</u> and <u>managers</u> of the DVBI		
	Printed Name of DV owner/manager	Date signed	
	Signature of DV owner/manager		
	Printed Name of DV owner/manager	Date signed	
	Signature of DV owner/manager		
	Printed Name of DV owner/manager	Date signed	
	Signature of DV owner/manager	JI.	

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# SECTION 3. MUST BE COMPLETED BY DVBES THAT PROVIDE RENTAL **EQUIPMENT AND ARE NOT BROKERS/AGENTS**

Skip this section if (i) the DVBE is not providing rental equipment or (ii) the DVBE indicated in Section 2 that it is a broker or agent

Secii	on 2 mai it is a broner or agent.			
	ek applicable boxes below 3 <u>and</u> provide e DVBE.	le original signatures of all DV owners and managers		
	Pursuant to MVC 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with MVC 999 et seq.			
	The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented in connection with this solicitation. I (we), the DV owner(s) of the equipment, have submitted to DGS my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in MVC 999.2 (c) and (g).			
Disa	bled veteran <u>owners</u> of the DVBE: (a	attach additional sheets if necessary)		
	Printed Name of DV owner	Tax ID Number of DV owner		
	Address of DV owner	DV owner Telephone Number		
	Signature of DV owner	Date signed		
	Printed Name of DV owner	Tax ID Number of DV owner		
	Address of DV owner	Telephone # of DV owner		
	Signature of DV owner	Date signed		
Disa	bled veteran <u>managers</u> of the DVBE:	: (attach additional sheets if necessary)		
	Printed Name of DV manager	Date signed		
	Signature of DV manager			
	Printed Name of DV manager	Date signed		
	Signature of DV manager			

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### **DVBE DECLARATION INSTRUCTIONS**

### **General Instructions**

In this form, (i) "DGS" refers to the Department of General Services; and (ii) "Consultant" refers to a person or entity that submits a response to a competitive solicitation issued by the Judicial Council.

If Consultant wishes to claim the DVBE incentive in a solicitation where a DVBE incentive is offered, it must complete this DVBE Declaration itself. If no DVBE incentive is offered, or Consultant does not wish to claim the DVBE incentive, Consultant should not submit this DVBE Declaration.

The Judicial Council will, in its discretion and in accordance with the RFP, determine whether Consultant is eligible to receive the DVBE incentive based on information provided in this DVBE Declaration. The Judicial Council may, but is not obligated to, verify or seek clarification of any information set forth in this DVBE Declaration. If Consultant submits incomplete or inaccurate information, it will not receive the DVBE incentive.

#### **Instructions for Section 1**

Provide the full legal name of the DVBE, and its DGS Supplier ID number. This number is in the DVBE's DGS Supplier Profile, accessible at: <a href="https://caleprocure.ca.gov/pages/PublicSearch/supplier-search.aspx">https://caleprocure.ca.gov/pages/PublicSearch/supplier-search.aspx</a>\

### **Instructions for Section 2**

Check only one box. If the DVBE is not a broker or agent, check the first box. If the DVBE is a broker or agent, check the second box and provide the name, address, and phone number of the principal for which the DVBE is an agent or broker. Military and Veterans Code section 999.2(b) defines "broker" or "agent" as an individual or entity that does not have title, possession, control, and risk of loss of materials, supplies, services, or equipment provided to [the Judicial Council], unless one or more of the disabled veteran owners has at least 51-percent ownership of the quantity and value of the materials, supplies, services, and of each piece of equipment provided under the contract.

All disabled veteran owners and managers of the DVBE must sign and date Section 2. If there are insufficient signature blocks for all disabled veteran owners and managers to sign, attach additional sheets.

### **Instructions for Section 3**

The DVBE must complete Section 3 only if both of the following are true (i) the DVBE will provide rental equipment in connection with the contract, and (ii) the DVBE checked the first box in Section 2, indicating that it is not a broker or agent.

If (i) the DVBE will not provide rental equipment in connection with the contract, or (ii) the DVBE checked the second box in Section 2, indicating that it is a broker or agent, the DVBE should neither check a box in Section 3 nor provide the signatures in Section 3.

Check each box in Section 3 if the corresponding statement is true.

All disabled veteran owners of the DVBE must sign and date Section 3, in the signature blocks designated for disabled veteran owners. Each disabled veteran owner of the DVBE must also provide their tax ID number, address, and telephone number in the signature block. If there are insufficient signature blocks for all disabled veteran owners, attach additional sheets.

All disabled veteran managers of the DVBE must sign and date Section 3, in the signature blocks designated for disabled veteran managers. If there are insufficient signature blocks for all disabled veteran managers, attach additional sheets.

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