

## Attachment 3

### Project Financial Questionnaire

#### Redmond Municipal Airport Terminal Building Expansion Project City Project No. AP2205

Proposer: \_\_\_\_\_

#### Preparation of Project Financial Questionnaire

Together with completion of this document, the Proposer must supplement its response with the Financial Statements stated below. The Proposer must provide with this questionnaire a copy of its latest Financial Statements as *audited or reviewed* for its last fiscal year, prepared in accordance with the standards of the American Institute of Certified Public Accountants. Proposer's balance sheet, income statement, statement of retained earnings, cash flow statement and supporting schedules and notes ("Financial Statements") and the opinion of an independent auditor must accompany this Project Financial Questionnaire. An independent certified public accountant registered and licensed under the laws of any state must have prepared the Financial Statements. A compiled financial statement is not acceptable.

**FINANCIAL RESPONSIBILITY STATEMENT**

Name of Firm:				
End of Firm's Fiscal Year: Day:			Month:	
Date of Year-end Financial Statements				
<div style="display: flex; justify-content: center; align-items: center; gap: 20px;"> <span>_____ / _____ / _____</span> </div> <div style="display: flex; justify-content: center; align-items: center; gap: 20px; margin-top: 5px;"> <span>Month</span> <span>Day</span> <span>Year</span> </div>				
As of the above date, the Proposer's total assets, liabilities, and net worth are as follows:				
Total Tangible Assets		Total Liabilities		Net Worth
\$		\$		\$
<p>ADDITIONAL FINANCIAL RESOURCE(S) (e.g., bank line of credit, parent firm guarantee, personal pledge of net worth, etc.). Any additional financial resources shall have a notarized letter to document the pledge/guarantee. The required information within the letter must have the dollar amount, purpose of the pledge/guarantee, and a termination date for the pledge/guarantee.</p> <p>If additional financial resources comprise any portion of the totals indicated above, indicate in the 'Yes' column below.</p>				
Source	\$ Amount	Termination Date	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

<b>Statement of Financial Ability</b>		
<p>Proposer certifies that its net worth has not substantially changed from that sum shown on the Financial Responsibility Statement. Proposer is able to secure the Performance Bond and Payment Bond (full contract amount) for any project for which it has submitted a proposal or bid and is the successful contractor.</p>		
<p>Your firm's largest bonded, successfully completed project in the last three years is:</p>		
<p>Your firm's bond for that project was:</p> <p>\$</p>	<p>Date that project was substantially completed:</p>	
<p>Name of firm (as registered with the Oregon Department of Licensing):</p>		
<p>By: (Authorized Signature)</p>	<p>Title:</p>	
<b>Business Account Numbers (List business account numbers for your firm)</b>		
<p>Unified Business Identifier No. (UBI):</p>	<p>Oregon State Contractor Registration No.:</p>	<p>Federal (IRS) Employer Identification No.:</p>
<p>Secretary of State (OR) Corporate No.:</p>	<p>Expiration Date:</p>	

**Attachment 3  
Project Financial Questionnaire  
Redmond Municipal Airport  
Terminal Building Expansion Project  
City Project No. AP2205**

<b>Type of Organization</b>			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company ("LLC")			
<b>Corporation</b>		<b>Partnership or Joint Venture</b>	
If your organization is a corporation or LLC, complete the following:		Date of Organization:	Status: <input type="checkbox"/> General <input type="checkbox"/> Limited <input type="checkbox"/> Assoc
Date Incorporated or Organized:	In What State?	Is there any information on duration of partnership or joint venture? <input type="checkbox"/> Yes <input type="checkbox"/> No    If Yes, Explain:	
President's or Manager's Name:	Vice President's Name:		
Secretary's Name:	Treasurer's Name:		
If out-of-state corporation or LLC, have you complied with Oregon's corporation or LLC laws, as applicable? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Other Organization Affiliation:</b> List those persons within your organization that have business affiliation in any other organization which is involved in construction-oriented projects as contractor, subcontractor, supplier or consultant.			
Name of Individual		Location and Name of Other Organization	

**Non-Collusion**

Please furnish the following information:

1. Has your firm ever been indicted, pled guilty, pled nolo contendere (no contest), or been convicted of any offense that has resulted in your firm being barred from bidding or performing work for any state, local or federal government?  
 Yes  No
  
2. If yes, attach a separate sheet(s) to this form giving the details involved, the names of the individuals, and their current employment status with your firm.
  
3. Has any officer, employee, or other member of your firm ever been indicted, pled guilty, pled nolo contendere, or been convicted of any illegal restraints of trade, including collusive bidding:  Yes  No  
If yes, attach a separate sheet(s) to this form giving the details involved.
  
4. Has any officer, employee, or other member of your firm ever been debarred for violation of any federal, state, and/or local public contracting law, including any incorporating labor standards provisions?  
 Yes  No
  
5. Is your firm currently, or has it ever been, under the protection of any bankruptcy court?  
 Yes  No
  
6. Does your firm have a pending petition in any bankruptcy court?  
 Yes  No
  
7. Does your firm currently, or has it ever, made an assignment for the benefit of a creditor(s)?  
 Yes  No

<b>Authorized Signature</b>		
List the names and titles of those individuals in your organization who are authorized to execute Proposals, contracts, bonds, and other documents and/or instruments on behalf of the organization. Specify if more than one signature is required.		
<b>Name (Type or Print)</b>	<b>Signature</b>	<b>Title</b>

**Execution of the Affidavit**

- Sole Proprietorship
Signature of the individual in the firm name under which business is conducted.
- Partnership
The signature of all partners, general and limited under the firm name, or the signature of their attorney in fact.
- Corporation
The signature of the authorized officer(s) of the corporation with corporate seal affixed.
- LLC
The signature of the authorized manager(s) and any other authorized persons of the LLC.
- Joint Venture
Signature of an authorized representative of each party to the joint venture. Corporate members of a joint venture shall also affix the corporate seal.

**AFFIDAVIT**

The undersigned, being duly sworn, deposes and says that the foregoing is a true statement of facts concerning the sole proprietorship, corporation, limited liability company, partnership, or joint venture herein named, as of the date indicated; that the Financial Responsibility Statement and Financial Statements taken from the books of said firm or individual are a true and accurate statement of the financial condition of said firm or individual as of the date hereof; that the answers to the foregoing interrogatories are true; that this statement is for the express purpose of inducing City to award the said firm or individual a contract; and that any depository, owner, vendor, or other governmental entity herein named is hereby authorized to supply City or its agent with any information to verify this statement.

Name of Firm (as registered with the State of Oregon): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss.

This instrument was acknowledged before me on \_\_\_\_\_, 2023 by \_\_\_\_\_,  
as \_\_\_\_\_

\_\_\_\_\_  
Notary Public for \_\_\_\_\_

Commission No.: \_\_\_\_\_

Corporate Seal

My Commission Expires: \_\_\_\_\_