



CHRISTY KHOURY, COUNTY TREASURER

ORANGE COUNTY ADMINISTRATION BUILDING

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Becky Selvidge
Chief Deputy Treasurer

Andrea Bilbo
Assistant Payroll Clerk
Cathy Roberts
Clerk/Cashier

Date: April 12, 2021

TO: Orange County Banks

RE: Orange County Depository

Ladies and Gentlemen:

The County of Orange is currently seeking competitive proposals for banking services from all banks located in Orange County.

Orange County is seeking a contractual banking relationship that conforms to all applicable state and federal laws, which will provide for all banking services required for the funds of Orange County, in accordance with Chapters 116 and 117 of the Local Government Code (V.T.C.A.)

The County requests a four year contract, with selection to be determined by the Orange County Commissioners Court.

Sealed proposals from banking corporations desiring to be selected as Depository, will be accepted prior to, but no later than, **2:00 p.m., on Tuesday, May 4, 2021**. Proposals will be opened at the Orange County Purchasing Department, 714 Polk Street, Orange, Texas 77630. Please submit one (1) original and five(5) copies in a sealed envelope or box clearly marked on the outside RFP-21001-Bank Depository.

Proposals should be addressed to: Orange County Purchasing Department, 714 Polk Street, Orange, Texas 77630 C/O Christy Khoury, Orange County Treasurer. Any questions concerning this proposal should be addressed to County Treasurer, Christy Khoury, phone (409)882-7991. Proposals received later than the date and time above will be returned unopened. ***Proposals must be submitted on the attached Bid Worksheet. Proposals not submitted on the attached Bid Worksheet, using the EXACT format provided, will be disallowed.*** You are encouraged to offer any alternative approaches which will further enhance our operational and financial success.

The County expressly requests that proposers not discuss this engagement or the bank's plans, experience or credentials with other banks or any member of Commissioners' Court until requested by county officials to make a personal presentation.

The Orange County Treasurer's Office has available for examination, statements and other information of past County Depositories. This information is voluminous and copies can be provided upon request for a reasonable charge. To examine this information please call the Treasurer's Office at (409) 882-7991 so arrangements can be made.

The County expressly makes no representation that County deposits will continue at the same level as previous years, or that the character of deposits will follow the same or similar patterns of previous years.

A Certified or Cashier's Check for \$ 262,930.22 must accompany the bid and is tendered under the terms of the law (116.023, V.C. Local Government Code) and of these conditions. Each bank must submit a copy of their plans showing that they are in compliance with the Community Reinvestment Act of 1977, Sec 2903, as well as a list of references of other public entities currently under depository contract.

Orange County reserves the right to reject in part or in whole any or all bids, waive minor technicalities, and award the bid which best serves the interest of Orange County. Orange County reserves the right to informally negotiate certain finer points of the final contract with a qualified bidder.

Sincerely,

Christy Khoury
Orange County Treasurer

REQUEST FOR PROPOSAL

PROPOSAL TITLE: ORANGE COUNTY BANK DEPOSITORY CONTRACT

RFP# 21001

RECEIVING DATE: MAY 4, 2021

RECIEVING TIME: 2:P.M., CST

OPENING DATE: TUESDAY, MAY 4, 2021 AT 2:P.M. CST

CONTACT PERSON: CHRISTY KHOURY

409-882-7991

E-MAIL: ckhoury@co.orange.tx.us

SPECIFICATIONS FOR PROPOSALS

RFP # 21001 ORANGE COUNTY BANK DEPOSITORY CONTRACT

**The selection of County Depositories and the terms of depository contracts are governed by Tex. Loc. Gov't. Code Ann., Chapter 116 and Chapter 117
(Vernon 1999 and Supp. 2000)**

GENERAL SPECIFICATIONS:

- 1.1 **SCOPE OF THE CONTRACT** - It is the intent of Orange County to execute a contract with a bank desiring to be designated as the County Depository Bank and (or) Sub-Depository Bank. The Contract will include Orange County Public Monies, including all funds collected by the Orange County Tax-Assessors Collector, District Attorney, Sheriff, District and County Clerks, Community Supervision, Juvenile Probation, and all accounts opened using the Orange County Tax ID number.
- 1.2 **RESPONSE REQUIRED FOR EACH SECTION AND SUBSECTION** - Each and every section and subsection of this bank proposal requires a response from the Bank Depository applicants. Responses should be carefully considered. Applicants must format responses in the same sequence as the bank proposal.
- 1.3 **MINOR EXCEPTIONS** - Minor exceptions, conditions, or qualifications to the provisions of the County's specifications must be clearly identified as such, with the reasons therefore.
- 1.4 **DOCUMENT ON DISK** - At Bidder's request, this document will be furnished as a "WORD" file on C.D. to facilitate the completion of the bid. This document will also be available on the Orange County Web Site www.co.orange.tx.us
- 1.5 **EVALUATION PROCESS** Orange County will award the Depository Bank contract based on, but not limited to, the following criteria:
 - a) Bank's financial position.
 - b) Bank's ability to pledge adequate securities against County funds.
 - c) Experience in providing depository services requested with other public entities.
 - d) Net rate of return on County funds.
 - e) Ability to meet service requirements.
 - f) Cost of services.
 - g) Cash management products available that will enhance the County's banking procedures.
 - h) The experience and continuity of the bank officials who have been identified as primary contact personnel.
- 1.6 **INTERVIEWS** - The County may require Proposing Banks to attend an interview with the Orange County Officials reviewing the proposals.
- 1.7 **QUESTIONS AND CLARIFICATIONS** Any questions or requests for clarifications should be submitted to:

CONTRACTURAL REQUIREMENTS:

- 2.1 **TYPE OF BANKING RELATIONSHIPS** - The Depository Bank will handle daily banking services including, but not limited to, checking accounts, other types of interest-bearing accounts, non-interest-bearing accounts, time deposits, and/or Certificates of Deposit.
- 2.2 **COMPLIANCE WITH STATUTES** - By returning the Bid Worksheet, the Bank acknowledges that it understands the Revised Civil Statutes of Texas (Article 2544, et. Seq., of the Revised Civil Statutes of Texas, as revised by Local Government Code, Chapter 116.000 through 116.155 as passed by the 70th leg. 1987; Article 2547 (a)(b)(c) and Article 2558(a) et. Seq.) that pertain to the managing and safekeeping of County funds and will comply with those statutes.
- 2.3 **BANK AFFILIATION** A proposing bank must be a member of the Federal Reserve System and the Federal Deposit Insurance Corporation. The bank must be a Federal or Texas chartered bank doing business in and having a service facility within Orange County.
- 2.4 **DURATION** - The Bank contract will be effective for a period of four (4) years ending sixty (60) days from the time fixed by law for the next selection of a depository. If a time deposit or certificate of deposit maturity extends beyond the expiration date of the depository contract, the depository will pledge sufficient securities as required by law for public funds, to provide for the maturity of the time deposit or certificate of deposit.
- 2.5 **RENEGOTIATIONS** - This four year contract shall allow the bank to establish, on the basis of negotiations with the county, new interest rates and financial terms of the contract that will take effect during the final two years of the four year contract if:
 - a) the new financial terms do not increase the prices to the county by more than 10 percent; and
 - b) the county has the option to choose to use the initial variable interest rate option, or to change to the new fixed or variable interest rate options proposed by the bank.
- 2.6 **INVESTMENTS MADE OUTSIDE DEPOSITORY BANK** - Orange County reserves the right to make investments outside the Depository Bank in accordance with the Laws of the State of Texas, as a result of court order, and the Investment Policy of Orange County. All investment purchases shall be made on a delivery versus payment basis.
- 2.7 **SUBMITTING FINANCIAL STATEMENTS** - All Banks wishing to be designated as a Depository Bank will include as part of the Proposal:
 - a) The Bank's last three (3) quarterly Uniform Bank Performance Reports.
 - b) The Bank's last three (3) Call Reports
 - c) The Bank's Annual Financial Reports for the past 2 years.
- 2.8 **GOOD FAITH GUARANTEE** - A Bank desiring to be the Depository Bank must submit with the Bid Proposal Worksheet, a certified cashier's check in the amount of \$ 262,930.22 (one-half of one percent of the county's revenue for the preceding

year) payable to Orange County as a guarantee of good faith. The County will hold the check until a Depository Bank is selected and the bond and/or security has been filed.

2.9 LIQUIDATED DAMAGES FOR NOT PROVIDING SECURITY As stated in Code Section 116.023:

"If a bank is selected as a depository and does not provide the bond and / or security, the county shall retain the amount of the check as liquidated damages."

A new depository shall then be selected.

2.10 SECURITY - Within fifteen (15) days after selection of the Depository, the Bank so selected is to qualify as a County Depository. As soon as the contract for securities pledged is provided and approved by the Commissioners' Court, an order will be entered by the County designating the successful applicant, or applicants, as Depository for the funds of Orange County. This contract shall remain in place until sixty (60) days after the time fixed for the next selection of a Depository, to-wit, **May, 2025**, or until such time as a new Bank has qualified as County Depository, whichever should sooner occur. Thereupon, the County Treasurer will place with said Depository all the funds belonging to Orange County.

2.11 PLEDGED COLLATERAL -

a) Pledged Securities in the amount provided by law under Sec. 116.054, V. T. Local Government Code, will be provided in quantities sufficient to fully collateralize 105% all of the Funds of Orange County and their subdivisions.

- 1) U.S. Treasury Notes
- 2) U.S. Treasury Bills
- 3) Federal Farm Credit Banks Notes and Bonds
- 4) Federal Home Loan Banks Notes and Bonds
- 5) Federal National Mortgage Association Notes and Bonds
- 6) Federal Home Loan Mortgage Corporation Notes and Bonds
- 7) Federal Home Loan Bank Letters of Credit

The bank must be the true and legal owner of all securities, which will be pledged to the County. The securities must be free and clear of all liens, claims, or pledged for other purposes. The County will not accept any security acquired by the bank under a repurchase agreement. The securities will be deposited with the Federal Reserve Bank or the Bank of New York-Mellon Trust Company, without expense to the County under an appropriate contract to be drawn to the provisions of Tex. Loc. Gov't Code Chapter 116 and amendments in accordance with the application, if approved.

2.12 COLLATERAL MANAGEMENT - The Depository Bank must include, as part of the Bid, a statement as to how the bank intends to ensure, on a daily basis, that sufficient collateral is pledged to protect covered accounts. Also a detailed monthly collateral report is required. The report shall contain security descriptions, par value/current face and current market value.

2.13 VALUE OF COLLATERAL - The Depository Bank must propose how it will value pledged securities. The County at any time may investigate the value of any of the securities that may be pledged by the Bank. The full cooperation of the Bank will be required in such instance.

- 2.14 **DAILY REPORTS** - A **daily** list of account balances and market value of pledge collateral will be available to the County Treasurer.

SERVICE REQUIREMENTS:

- 3.1 **CONTACT PERSON** - Bank must identify a local senior level management person who will be responsible for overseeing the County's entire relationship, who would serve as the County's primary contact and who would be able to make decisions regarding operational aspects of this contract. Bank must also provide a list of contact personnel and phone numbers within the bank who are qualified to provide information and assistance in the following areas:
- General Information
 - Safekeeping and Securities Clearance
 - Posting and Deposit Discrepancies
 - Stop Payments
 - Balance Adjustments
 - Collateral Adequacy
 - Internal Transfers
 - Wire Transfers
 - Online PC Service
 - Certificates of Deposit rate quotes
 - Signature Cards
 - Opening and Closing of Accounts
 - On-Line Services
- 3.2 **ON-LINE SERVICES** - It is requested that as a part of the proposal the Depository Bank will provide an on-line communication link to the County allowing Self Administration and for daily reporting of fund balances, wire and book transfers, managing controlled disbursements, collected and ledger balances, check imaging, stop payment requests, confirmations, and detailed debits and credits. Attach product description, pricing, and sample reports for the on-line link available. **Banks should be prepared to provide the Treasurer's office an opportunity to physically work with this technology before the bid is awarded.**
- 3.3 **ON-LINE COLLATERAL REPORTING**- For daily collateral balances.
- 3.4 **ANALYSIS REPORT** - Monthly account analysis reports will be provided for each account and on a total account basis. Reports will be made available online and in multiple formats. The account analysis will contain, at a minimum, the following:
- average ledger balance
 - average float
 - average collected balance
 - average negative collected balance
 - average positive collected balance
 - reserve requirement
 - available balance for earnings credit
 - price levels for each activity

- monthly volumes by type
- earnings credit allowance (provide an explanation of how the earnings credit rate is calculated)

A sample account analysis report will be provided as part of the Bid.

3.5 **STATEMENTS-**

--- Monthly and/or weekly bank statements will include checks or image of checks on CD Rom, deposit slips, transfer slips and debit and credit memos, processed for ALL accounts. The daily ledger balances, average daily collected balances, number of debits, number of credits, and other items on which charges are based, should also be included in each monthly statement.

--- A hard copy or an electronic copy of canceled checks shall be furnished to the County at month's end.

--- Statements should be processed no later than ten (10) business days after the close of each month.

--- If a weekly bank statement is required, the preceding week's statement should be available on the Thursday of the current week.

--- A sample bank statement will be included as a part of the Bid.

3.6 **PAYROLL DIRECT DEPOSIT** - Bank must provide the capability for the county to utilize "Direct Deposit" payroll processing, allowing employees to select the bank of their choice.

3.7 **ACH TRANSACTIONS**- Bank must provide for acceptance of ACH (Automated Clearing House) credits and debits. **Bank will be required to provide detailed information, as well as ACH blocks on certain accounts.**

3.8 **WIRE TRANSFERS** - Bank must provide the ability to send wire transfers on an automated or manual basis, and also provide the ability to receive wire transfers. Bank must provide the ability to restrict outgoing wire transfers (debits) to only those authorized.

3.9 **INTEREST RATES** - Floating interest rate bids and a fixed interest rate bids on accounts and certificates of deposit will be quoted by the Bank. Orange County reserves the right to select the rate most favorable to the County at any time during the term of the contract, within the guidelines of Section 116.021 (b) of the Code.

3.10 **DISBURSEMENT SERVICES** – A successful Bidder will furnish standard disbursing services for all accounts to include the payment of all County checks upon presentment. Bank must also agree to cash, without charge to the County or County employee, an employee's payroll check whether or not the employee has an account with the Bank. This will include any of the Bank's locations or motor-bank facility in Orange County, Texas.

3.11 **POSITIVE PAY** – The Bank will provide a means for the County to upload disbursed check information that will be compared to checks that are presented to the bank for clearing. Any discrepancies shall be cleared by a designated County employee before checks are paid by the bank. Any applicable cost should be quoted.

3.12 **DEPOSIT SERVICES** - The Bank will guarantee immediate credit on all wire transfers, ACH transactions and government checks upon receipt and all other checks based on the Bank's Availability Schedule. All deposits received before the Bank's established deadline will be credited daily. Bank will include a copy of

- their availability Schedule as part of the bid.
- 3.13 **CASH OVERDRAFTS** - For the purpose of determining cash overdrafts, the daily cash balance in all County accounts will be added together and if a negative balance occurs, the County's account is considered to be over-drafted. An applicable insufficient funds fee can then be charged.
 - 3.14 **COMPUTERIZED OUTPUT** - The Bank must provide the capability for the County to download paid items that will be utilized in the bank account reconciliation process.
 - 3.15 **SECURITY SAFEKEEPING** - Bank must provide for book entry/OTC acceptance and safekeeping of investment securities. A month end safekeeping statement including market values will be provided.
Indicate costs associated with a security purchase settlement.
 - 3.16 **PAYMENT FOR SERVICES** - The County may elect to pay for service either by direct fee payment or by compensating balance.
 - 3.17 **CASH MANAGEMENT** - On an ongoing basis the County will require cash management advice as to how accounts and procedures should be structured. Also, the County will want to be kept informed of recent developments in cash management products. Bidders are invited to propose additional cash management services that are not specified herein.
 - 3.18 **EXPENSE ALLOWANCE** - State the dollar amount, if any, that the Bank will provide for expenses incurred due to changing depository banks.
(For example: checks, deposit slips, endorsement stamps, and etc.)
 - 3.19 **CAPITAL TO ASSETS RATIO** - Depository Banks will have and maintain a minimum five percent primary capital to assets ratio as compiled by dividing line 28 (total equity capital) by line 42 (total assets) on the Federal Financial Institutions Examination Council Form 032. Copies of the FFIEC form 32 statement will be included in the bid and shall be a continuing quarterly reporting requirement of the Depository Bank. Should primary capital ratio fall below five percent, the Commissioners Court will review bank plans to future earnings and capital increases before determination is made to close out the depository.
 - 3.20 **STOP PAYMENTS** - The Bank will be required to process stop payments on verbal, faxed or e-mailed instructions from the designated county employees with follow-up written confirmation.
 - 3.21 **CREDIT CARDS** - Should Orange County choose to utilize Credit Cards, please include Bank information concerning the use of and policy regarding Credit Cards.
 - 3.22 **DISBURSEMENT SERVICES** - Disbursing services for all accounts are required to include the payment of all County checks upon presentation.
 - 3.23 **BANK RECONCILIATION SERVICES** - The Bank will provide partial or full reconciliation services, on specific accounts determined by the County. List what is included in both reconciliation services.
 - 3.24 **OTHER SPECIFIC SERVICES** - As described on the **Bid Worksheet**, the Bank will acknowledge services provided and attendant fees for such.
 - 3.25 **CHECK 21** - The Bank will provide Electronic Deposit Service (Check 21) to

transmit files.

- 3.26 **DESKTOP DEPOSIT-The** bank will provide desktop deposit service and equipment needed to utilize.

STRUCTURE OF ACCOUNTS:

The County's bank accounts will be structured as follows (numbers and dollar amounts are subject to change):

- Non-Interest Bearing Checking Accounts -- 4
- Estimated balances equal -- \$ 350,890.00
- Interest Bearing Checking and/or Money Market Savings Accounts -- 56
- Estimated balance equal \$ 19,195,621.00
- Certificates of Deposit _ \$ -0-
- Estimated balances equal -- \$ 0.00

The County requests a bid for the interest rate on these accounts as a Whole.

**Bid Proposal Worksheet for
RFP # 21001 Orange County Depository
Contract**

Variable and Fixed Rate Bids -

	<u>Variable Interest Rate*</u>	<u>Fixed Interest Rate</u>
Interest Bearing Checking Accounts:	_____	_____
Money Market Accounts:	_____	_____
Sweep Accounts over \$1,000,000.00	_____	_____
Sweep Accounts under \$1,000,000.00	_____	_____

* Variable Rate = 91 Day US T-Bill Effective Rate (as determined by the latest T-Bill Auction) + Margin (Based on basis points). The source of the rate under this proposal for a given month should be the Effective Rate as quoted in the Wall Street Journal for the last business day of the previous month.

Example: If 91 Day UST-Bill effective rate is 3.3% and basis points are LO, then the variable rate is 4.3%.

Minimum balance requirement or other considerations per account will be listed below:

Certificates of Deposit - Variable Interest Rate -

91 Day UST-Bill Effective Rate (as determined by latest T-Bill Auction)

	<u>Less than \$100,000.00</u>	<u>More than \$100,000.00</u>
1. Maturity 7-29 days	+ _____ basis pts.	+ _____ basis pts.
2. Maturity 30-59 days	+ _____ basis pts.	+ _____ basis pts.
3. Maturity 60-89 days	+ _____ basis pts.	+ _____ basis pts.
4. Maturity 90-179 days	+ _____ basis pts.	+ _____ basis pts.
5. Maturity 180 days-less than one year	+ _____ basis pts.	+ _____ basis pts.
6. Maturity 1 year or more	+ _____ basis pts.	+ _____ basis pts.

Certificated of Deposits : Fixed Interest Rate -

	Less than \$100,000.00	More than \$100,000.00
1. Maturity 7-20 days	%	---%
2. Maturity 30-59 days	%	---%
3. Maturity 60-89 days	%	---%
4. Maturity 90-179 days	%	---%
5. Maturity 180 days-less than one year	%	---%
6. Maturity 1 year or more	%	---%

Cost Analysis Worksheet -

Use the following cost analysis worksheet as a vehicle to quote your charges and rates. Please prepare a bank analysis statement based on the following using your bid figures for the service costs and your variable interest rate for interest paid. Use applicable rates for calculating interest rates and compensating balances as they stood for December 31, 2020.

Balance Summary -

Average Book Balance	\$17,519,915.00
Less Average Float	1,047,532.00
Average Collected Balance	16,472,383.00
Average Negative Collected Balance	0

Balance Reconciliation -

Average Positive Collected Balance	\$
Less Cost of Analyzed Services (Balance Required)	_____
Additional Balance Required to Support Services	_____

Fee Reconciliation -

Earnings Allowance Credit	Rate: _____	_____
Less Analyzed Services Provided		_____
Services Charged to Account (Excess or Deficit)		_____

Cost Analysis Worksheet Continues -

Earnings credit calculated on the following balances:

Total

PLEASE PROVIDE AN EXPLANATION OF HOW THE EARNING CREDIT RATE IS CALCULATED: _____

RELATIONSHIP SUMMARY**SERVICE DETAIL**

SERVICE DESCRIPTION	YEARLY AVERAGE VOLUME	PRICE	CHARGE	BALANCE REQUIRED
BALANCE & COMPENSATION INFORMATION				
RECOUPMENT MONTHLY IB	22916			
RECOUPMENT MONTHLY	402			
GENERAL ACCOUNT SERVICES				
DDA STMT W/IMAGE CLASSIC-MTHLY BASE	7			
DESKTOP DEPOSIT-DEPOSIT CREDITED	40			
ACCT MAINTENANCE	1			
ACCT MAINTENANCE	7			
DDA STMT W/IMAGE PREMIUM-MTHLY BASE	1			
ACCT MAINTENANCE CHEXSTOR-PLUS	55			
DEBITS POSTED	95			
DDA STATEMENT - PAPER	7			
DDA STATEMENT - SPECIAL INSTRUCTION	2			
DEPOSITORY SERVICES				
ON-LINE RETURN DECISIONING PER ITEM	7			
MISCELLANEOUS CREDITS POSTED	2			
BRANCH DEPOSIT	208			
DEPOSITED CHECKS - DRAWN ON BANK	606			
DEPOSITED CHECK	3106			
DESKTOP DEPOSIT-DEPOSITED ITEM DRAWN ON BANK	233			
DESKTOP DEPOSIT-DEPOSITED ITEM	762			
CASH DEPOSITED IN BRANCH	314654			
CASH ORDER FEE IN A BRANCH	13			
ROLLED COIN FURNISHED BY BRANCH	20			
CURRENCY FURNISHED BY BRANCH	2547			
RETURN ITEM - CHARGEBACK	6			
ON-LINE RETURN ITEM RETRIEVAL-IMAGE	47			
ON-LINE RETURN ITEM SERVICE MTHLY BASE	10			
RETURN ITEM SPECIAL INSTRUCTIONS	1			
RETURN ITEM SPECIAL INST MTHLY BASE	18			
RETURN ITEM REDEPOSITED	2			
PAPER DISBURSEMENT SERVICES				
POSITIVE PAY EXCEPTION ON-LINE IMAGE	1			
PYMT AUTH MAX CHECK MTHLY BASE	1			
POSITIVE PAY EXCEPTION CHECKS RETND	1			
STOP PAYMENT ON-LINE	5			
POSITIVE PAY ONLY MONTHLY BASE	11			
POSITIVE PAY ONLY - ITEM	49			
ON-LINE IMAGE VIEW < 90 DAYS - ITEM	47			
ON-LINE IMAGE VIEW > 90 DAYS - ITEM	14			
DESKTOP DEPOSIT IMAGES RETRIEVED	2			
POSITIVE PAY EXCEPTIONS - ITEM	3			
POSITIVE PAY MONTHLY BASE	19			
POS PAY CHECKS WITH NO ISSUE RECORD	2			
ON-LINE PAID CHECK MONTHLY BASE	1			
DDA STATEMENT W/IMAGE PREMIUM-ITEM	10			
DDA STATEMENT W/IMAGE CLASSIC-ITEM	59			
ON-LINE PAID CHECK PER CD	1			

<u>SERVICE DESCRIPTION</u>	<u>YEARLY AVERAGE VOLUME</u>	<u>PRICE</u>	<u>CHARGE</u>	<u>BALANCE REQUIRED</u>
DDA CHECKS PAID	868			
STOP PAYMENT - PAPER CONFIRMATION	4			
PAYEE VALIDATION STANDARD-ITEM	486			
CASHIER'S CHECK	1			
BANK CHK CASHED FOR NONACCT HOLDER	1			
ON-LINE PAID CHECK PER ITEM	865			
STOP PAYMENT - AUTO RENEWAL	78			
PAPER DISBURSEMENT RECON SERVICES				
ON-LINE CHECK ISSUES-ITEM	52			
ARP MONTHLY BASE - PARTIAL	19			
ARP PART POSITIVE PAY ISSUE - ITEM	506			
ARP AGED ISSUE RECORDS ON FILE-ITEM	534			
ON-LINE ARP STMT & RPTS MONTHLY BASE	17			
ARP PARTIAL RECONCILIATION - ITEM	486			
GENERAL ACH SERVICES				
ON-LINE ACH HYP ITM DET INQ - PER ITEM	1			
ELECTRONIC CREDITS POSTED	483			
ACH MONTHLY BASE	2			
ACH ONE DAY ITEM	1023			
ACH TWO DAY ITEM	84			
ACH RECEIVED ITEM	511			
ACH RETURN ADMIN-MANUAL	1			
ACH PAYMENTS ON-LINE BATCH RELEASE	6			
ACH TRANSMISSION CHARGE	2			
ACH FAX SERVICE	1			
ACH PAYMENTS ONE DAY ITEM	68			
ACH PAYMENTS TWO DAY ITEM	16			
ACH PAYMENTS BASE FEE	2			
ACH ON-LINE FRAUD FILTER REVIEW MO BASE	39			
ACH ON-LINE FRAUD FILTER STOP MTHLYBASE	1			
ACH FRAUD FILTER STOP MTHLYBASE	1			
ACH ON-LINE FRAUD FILTER REVIEW - ITEM	1			
ACH FRAUD FILTER STOP - ITEM	1			
ACH BANKS NOC - FAX ADVICE	1			
EDI PAYMENT SERVICES				
REC MGR REPORT FAX/MAIL MONTHLY BASE	3			
REC MGR EDI REPORT ACH ITEM	1			
REC MGR EDI REPORT ACH ADDENDA ITEM	1			
ON-LINE TREAS INFO REPORT EDI SETUP	1			
ON-LINE EDI PMT DETAIL SUBSC MONTHLY BASE	40			
ON-LINE EDI PMT DETAIL - ITEM	132			
ON-LINE EDI PMT DETAIL - ADDENDA ITEM	131			
REC MGR EDI REPORT FAX PER PAGE	1			
WIRE & OTHER FUNDS TRANSFER SERVICE				
WIRE ACCOUNT ADD - ON-LINE	1			
WIRE MONTHLY DDA BASE - VOICE	11			
WIRE SECURITY PIN MONTHLY BASE	2			
WIRE IN - DOMESTIC	3			
WIRE MAIL CONFIRMATION	1			
WIRE TEMPLATE STORAGE MONTHLY BASE	20			
WIRE OUT DOMESTIC - BRANCH	1			
WIRE OUT DOMESTIC ON-LINE	3			
WIRE BOOK TRANSFER ON-LINE	9			

<u>SERVICE DESCRIPTION</u>	<u>YEARLY AVERAGE VOLUME</u>	<u>PRICE</u>	<u>CHARGE</u>	<u>BALANCE REQUIRED</u>
INFORMATION SERVICES				
DESKTOP DEPOSIT REPORT PER ITEM	15			
DESKTOP DEPOSIT MONTHLY BASE	24			
ON-LINE WIRE XFR DETAIL US ACCT ITEM	8			
INFOFAX WIRE MONTHLY BASE	2			
INFOFAX WIRE ITEM	1			
ON-LINE SEARCH	197			
ON-LINE PREV DAY REPORTING MAINTENANCE	61			
ON-LINE PREV DAY REPORTING ITEMS LOADED	1796			
ON-LINE EVENT MESSAGING SERVICE - EMAIL	341			
ON-LINE EVENT MESSAGING SERVICE - TEXT	1			
ON-LINE WIRE XFR DETAIL US ACCT MO BASE	56			
INFO REPORTING HISTORY STORAGE 90	16095			
ON-LINE PREV DAY EXT DETAIL ITEMS RPTD	2			

Total Analyzed Services Performed:

OTHER SPECIFIC SERVICES -As described on the Cost Analysis Worksheet, the Bank will acknowledge services provided and attendant fees for such. Also indicate charges for the following:

- Locked or Sealable bags _____
- Laser Checks _____
- Checks (in individual books or binders) _____
- Deposit Slips _____
- Endorsement Stamps _____
- Coin Wrappers _____
- Currency Straps _____

OTHER UNSPECIFIED SERVICES AND/OR COSTS Other services and/or costs not specified in this document should be listed and attached, along with a description and unit pricing.

SERVICE	COST

References:

List two (2) references for whom bidder has supplied similar services and/or supplies. Please include phone number and name of contact person. Other governmental units are preferred

Business	Contact Person	Phone Number

DEPOSITORY BANK

The Bank must complete the information below to validate the bid for a Orange County Depository Bank.

The undersigned affirms that they are fully authorized to execute this bid. The contents of this bid has not been discussed or communicated by the undersigned, nor by any employee or agent, with any other bidder, member of Commissioners' Court, or any other persons engaged in this type of business, prior to the official opening of this bid.

All unsigned Bids will be disqualified.

Name and address of Bank/Bidder:

Signature: _____

Name: _____

Title: _____

Telephone Number: _____

E-Mail: _____

Note: By my signature above, I hereby certify that the following are attached:

- A. A list of references of current Public Funds Users that utilize cash management products similar to those requested in bid.
- B. The Bank's last three (3) quarterly Uniform Bank Performance Reports.
- C. The Bank's last three (3) Call Reports.
- D. The Bank's Annual Financial Reports for the past 2 years.
- E. A Certified Check or a Cashier's Check as a guarantee of good faith.
- F. A sample monthly Collateral Report.
- G. Product description pricing, and sample reports for the on-line PC link available.
- H. A sample Account Analysis Report.
- I. A sample Bank Statement.
- J. A Copy of Bank's Availability Schedule.
- K. A Certified and Attested Resolution from a duly authorized meeting of the Board of Directors empowering the signer to execute this contract.
- L. A response to every section and subsection in the Invitation to Bid.
- M. Completed Cost Analysis Worksheets.
- N. Attachments indicating other services and charges not specified in the invitation to bid.

**RETURN PAGES 11 THROUGH 17 WITH BID PACKAGE
AND ALL REQUIRED INFORMATION**

The Purchasing Department shall verify all vendors, utilizing the System for Award Management (SAM).

The Purchasing Department will:

1. Go to the EPLS Website (<https://.SAM.Gov>).
2. The Purchasing Agent or their agent will search the EPLS system for the vendor.
3. If the vendor is found to be debarred, the vendor may not be used.
4. If the vendor is found not to be debarred, print the screen page and retain with the procurement documentation.

Vendors may register at NO COST directly at the SAM website: <https://www.sam.gov>.

SPECIAL REQUIREMENTS INSTRUCTIONS

Submission of FORM 1295 – Texas Ethics Commission – Form Below

As of January 1, 2016, per House Bill 1295, the Texas Ethics Commission (TEC) requires **all awarded vendors** to complete a Certificate of Interested Parties (Form 1295) at the time of notification of award.

FORM 1295, Complete Instructions, and Login Instruction are available via the Texas Ethics Commission:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm

Awarded Vendors must visit the TEC website link below, enter the required information on Form 1295, and print a copy of the completed form. The form will include a certification of filing that will contain a unique certification number.

At the time of award, the Orange County Purchasing Department will submit a request to the Awarded Vendor to both:

1. Submit Form 1295 online via the Texas Ethics Commission website link:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm

2. Submit a printed copy of Form 1295, signed by an Authorized Agent of the awarded vendor and with this bid.

CERTIFICATE OF INTERESTED PARTIES**FORM 1295**

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.		OFFICE USE ONLY																			
1 Name of business entity filing form, and the city, state and country of the business entity's place of business.																					
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.																					
3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.																					
4	Name of Interested Party	City, State, Country (place of business)	Method of interest (check applicable) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center; padding: 2px;">Controlling</td><td style="width: 50%; text-align: center; padding: 2px;">Intermediary</td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr><tr><td style="height: 15px;"></td><td></td></tr></table>	Controlling	Intermediary																
Controlling	Intermediary																				
5 Check only if there is NO interested Party. <input type="checkbox"/>																					
6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.																					
<div style="text-align: right; margin-bottom: 10px;">_____ Signature of authorized agent of contracting business entity</div> <div style="text-align: center; margin-bottom: 10px;"><small>AFFIX NOTARY STAMP / SEAL ABOVE</small></div> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div>_____ <small>Signature of officer administering oath</small></div><div>_____ <small>Printed name of officer administering oath</small></div><div>_____ <small>Title of officer administering oath</small></div></div>																					
ADD ADDITIONAL PAGES AS NECESSARY																					

Return Completed Form with Offer

SPECIAL REQUIREMENTS INSTRUCTIONS

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

- (a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

...
(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

- (i) a contract between the local governmental entity and vendor has been executed;

or

- (ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

- (a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

- (1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
- (2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
- (3) has a family relationship with a local government officer of that local governmental entity.

- (a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or

(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);

(B) that the vendor has given one or more gifts described by Subsection (a); or

(C) of a family relationship with a local government officer.

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

2 ☐ Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes ☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

☐ Yes ☐ No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 ☐ Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7

Signature of vendor doing business with the governmental entity

Date

Return Completed Form with Offer

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

Section 176.003 of the Local Government Code requires certain local government officers to file this form. A "local government officer" is defined as a member of the governing body of a local governmental entity; a director, superintendent, administrator, president, or other person designated as the executive officer of a local governmental entity; or an agent of a local governmental entity who exercises discretion in the planning, recommending, selecting, or contracting of a vendor. This form is required to be filed with the records administrator of the local governmental entity not later than 5 p.m. on the seventh business day after the date on which the officer becomes aware of the facts that require the filing of this statement.

A local government officer commits an offense if the officer knowingly violates Section 176.003, Local Government Code. An offense under this section is a misdemeanor.

Refer to chapter 176 of the Local Government Code for detailed information regarding the requirement to file this form.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

1. **Name of Local Government Officer.** Enter the name of the local government officer filing this statement.
2. **Office Held.** Enter the name of the office held by the local government officer filing this statement.
3. **Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code.** Enter the name of the vendor described by Section 176.001(7), Local Government Code, if the vendor: a) has an employment or other business relationship with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code; b) has given to the local government officer or a family member of the officer one or more gifts as described by Section 176.003(a)(2)(B), Local Government Code; or c) has a family relationship with the local government officer as defined by Section 176.001(2-a), Local Government Code.
4. **Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3.** Describe the nature and extent of the employment or other business relationship the vendor has with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code, and each family relationship the vendor has with the local government officer as defined by Section 176.001(2-a), Local Government Code.
5. **List gifts accepted, if the aggregate value of the gifts accepted from vendor named in Item 3 exceeds \$100.** List gifts accepted during the 12-month period (described by Section 176.003(a)(2)(B), Local Government Code) by the local government officer or family member of the officer from the vendor named in item 3 that in the aggregate exceed \$100 in value.
6. **Affidavit.** Signature of local government officer.

Local Government Code § 176.001(2-a): "Family relationship" means a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code.

Local Government Code § 176.003(a)(2)(A):

- (a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

...

- (2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

OFFICE USE ONLY

Date Received

1 Name of Local Government Officer

2 Office Held

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in Item 3.

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in Item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

Date Gift Accepted _____ Description of Gift _____

(attach additional forms as necessary)

6 AFFIDAVIT

I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

Signature of Local Government Officer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Return Completed Form with Offer

RESIDENCE CERTIFICATION/TAX FORM

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Orange County requests Resident Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contracts; pertinent provisions of §2252.001 are stated below:

(3) "Nonresident bidder" refers to a person who is not a resident.

(4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

☐ I certify that _____ [company name] is a Resident Bidder of Texas as defined in Government Code §2252.001.

☐ I certify that _____ [company name] is a Nonresident Bidder as defined in Government Code §2252.001 and our principal place of business is _____ (city and state).

Taxpayer Identification Number (T.I.N.):	
Company Name submitting bid/proposal:	
Mailing address:	
If you are an individual, list the names and addresses of any partnership of which you are a general partner:	

Property: List all taxable property owned by you or above partnerships in Orange County.

Orange County Tax Acct. No.*	Property address or location**

* This is the property amount identification number assigned by the Orange County Appraisal District.

** For real property, specify the property address or legal description. For business property, specify the address where the property is located. For example, office equipment will normally be at your office, but inventory may be stored as a warehouse or other location.

Return Completed Form with Offer

Minimum Specifications

Orange County Texas is asking for sealed bids to secure product pricing for various janitorial supplies, material, and products. The purpose of this IFB is to establish a contract from one or more qualified bidder(s) to provide the highest quality chemicals, cleaning, supplies, janitorial products and paper products as listed in this IFB to be ordered as needed during the term of the contract. Contract term will be one (1) year with an option to renew for three (3) additional years. It is likely that multiple awards will be made with this bid. Specifications are for unknown quantities of items to be purchased on an "as needed" basis.

The successful vendor must agree to mark shipments and invoices with a purchase order number. Shipment must be delivered prepaid to the Orange County Texas locations indicated on the purchase order, unless otherwise specified. Packing lists are to accompany the shipment in a container/carton properly marked as packing list.

Bidder warrants that the described material, equipment or labor meets all appropriate OSHA safety and health requirements. Further, it warrants that it will supply applicable Material Safety Data Sheets (MSDS) with the material shipment, and the said material or equipment will not produce or discharge in any manner or form, directly or indirectly, chemicals or toxic substance that could pose a hazard to the health or safety of anyone who may come in contact with the product.

No Guarantee Annual Volume

This is a bid for purchase as funds become available, however, there is no commitment to purchase any given number of products.

Brand Name or Approved Equals

Unless otherwise provided in this Invitation For Bid, the name of a certain brand, make or manufacturer does not restrict bidders to the specific brand, make or manufacturer named. Such a brand name conveys the general style, type, character and quality of the article desired, and any article/product with Orange County, in its sole discretion, determines to be the equal of that specified, considering quality, workmanship, economy of operation, and suitability for the purpose intended shall be accepted. Therefore, in all specifications where a material or article is defined by describing a proprietary product or by using the name of a vendor or manufacturer, it can be assumed that an approved equal can be substituted, unless otherwise indicated as no sub.

Method and Containers

Unless otherwise specified, goods shall be delivered in commercial packages in standard commercial containers, so constructed as to ensure acceptance by common or other carrier for safe transportation to the point of delivery.

Placing of Orders

Orders will be placed with successful bidder(s) on a Purchase Order executed and released by Orange County Purchasing. Orders will be placed by e-mail, electronic order entry or an established standard delivery order.

Returned Goods

The successful Bidder shall resolve all order and invoice discrepancies within five (5) business days from notification. Products returned due to quality issues, duplicate shipments, over-shipments, etc. shall be picked up by the successful Bidder within ten (10) business days of notification with no restocking or freight charges, and shall be replaced with specified products or Orange County shall be

Good Faith Effort (GFE) Determination Checklist

This information must be submitted with your bid.

Bidder intends to utilize subcontractors/subconsultants in the fulfillment of this contract (if awarded).

☐ Yes ☐ No

Instructions: In order to determine if a "Good Faith Effort" was made in soliciting HUBs for subcontracting opportunities, the following checklist and supporting documentation shall be completed by the Prime Contractor/Consultant, and returned with the Prime Contractor/ Consultant's bid. This list contains the **minimum** efforts that should be put forth by the Prime Contractor/Consultant when attempting to achieve or exceed the goals of HUB Subcontractor participation. The Prime Contractor/Consultant may extend his/her efforts in soliciting HUB Subcontractor participation beyond what is listed below.

Did the Prime Contractor/Consultant . . .

- | | | |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 1. To the extent practical, and consistent with standard and prudent industry standards, divide the contract work into the smallest feasible portions, to allow for maximum HUB Subcontractor participation? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 2. Notify in writing a reasonable number of HUBs, allowing sufficient time for effective participation of the planned work to be subcontracted? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 3. Provide HUBs that were genuinely interested in bidding on a subcontractor, adequate information regarding the project (i.e., plans, specifications, scope of work, bonding and insurance requirements, and a point of contact within the Prime Contractor/Consultant's organization)? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 4. Negotiate in good faith with interested HUBs, and not reject bids from HUBs that qualify as lowest and responsive bidders? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 5. Document reasons HUBs were rejected? Was a written rejection notice, including the reason for rejection, provided to the rejected HUBs? |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | 6. If Prime Contractor/Consultant has zero (0) HUB participation, please explain the reasons why. |

If "No" was selected, please explain and include any pertinent documentation with your bid.

If necessary, please use a separate sheet to answer the above questions.

Printed Name of Authorized Representative

Signature

Title

Date

Return Completed Form with Offer

Notice of Intent (NOI) to Subcontract with Historically Underutilized Business (HUB)

Bidder intends to utilize subcontractors/subconsultants in the fulfillment of this contract (if awarded).

☐ Yes ☐ No

Instructions for Prime Contractor/Consultant: Bidder shall submit this form with the bid; however, the information below may be submitted after contract award, but prior to beginning performance on the contract. Please submit one form for each HUB Subcontractor/Subconsultant with proper signatures, per the terms and conditions of your contract.

Contractor Name: _____ HUB: ☐ Yes ☐ No

Address: _____
Street City State Zip

Phone (with area code): _____ Fax (with area code): _____

Project Title & No.: _____

Prime Contract Amount: \$ _____

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Orange County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Printed Name of Contractor Representative

Signature of Representative

Date

Printed Name of HUB

Signature of Representative

Date

NOTE: NOTHING ON THIS NOTICE OF INTENT FORM IS INTENDED TO CONFER ANY RIGHTS, EXPRESSED OR IMPLIED, TO ANY THIRD PARTIES.

Pre-Approval for Subcontractor Substitutions must be obtained from the Orange County Purchasing Agent's Representative. The "HUB Subcontractor/Subconsultant Change Form" must be completed and faxed to 409-670-4170

Return Completed Form with Offer

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 1 OF 4

This information must be submitted with your bid.

Bidder intends to utilize subcontractors/subconsultants in the fulfillment of this contract (if awarded).

☐ Yes ☐ No

Prime Contractor: _____ HUB: ☐ Yes ☐ No

HUB Status (Gender & Ethnicity): _____

Address: _____
Street City State Zip

Phone (with area code): _____ Fax (with area code): _____

Project Title & No.: _____ IFB/RFP No.: _____

Total Contract: \$ _____ Total HUB Subcontract(s): \$ _____

Construction HUB Goals: 12.8% MBE:: _____ % 12.6% WBE: _____ %

Sub-goals: 1.7 African-American, 9.7% Hispanic, 0.7% Native American, 0.8% Asian American.
Use these goals as a guide to diversify.

FOR HUB OFFICE USE ONLY:

Verification date HUB Program Office reviewed and verified HUB Sub information Date: _____ Initials: _____

PART I. HUB SUBCONTRACTOR DISCLOSURE

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Texas Bldg & Procurement Comm. ☐ Texas Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Return Completed Form with Offer

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 2 OF 4

HUB SUBCONTRACTOR DISCLOSURE

PART I: Continuation Sheet

(Duplicate as Needed)

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Orange County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Orange County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

All HUB Subcontractor Participation may be verified with the
HUB Subcontractor(s) listed on Part I.

Return Completed Form with Offer

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 3 OF 4

PART II: STATEMENT OF NON-COMPLIANCE FOR NOT MEETING HUB SUBCONTRACTING GOALS

Please complete Good Faith Effort (GFE) Checklist and attach any supporting documentation.

Our firm was unable to meet the HUB goals for this project for the following reasons:

- ☐ All subcontractors to be utilized are "Non-HUBs." (Complete Part III)
- ☐ HUBs were solicited but did not respond.
- ☐ HUBs solicited were not competitive.
- ☐ HUBs were unavailable for the following trade(s):
- ☐ Other: _____

Was the Orange County HUB Office contacted for assistance in locating HUBs? ☐ Yes ☐ No

PART III: DISCLOSURE OF OTHER "NON-HUB" SUBCONTRACTS

The bidder shall use this area to provide a listing of all "Non-HUB" Subcontractors, including suppliers, that will perform under this project. A list of those "Non-HUB" Subcontractors the bidder selects, after bid submission, shall be provided to the Purchasing Office not later than five (5) calendar days after being notified that bidder is the apparent low bidder. A list of those "Non-HUB" Subcontractors that are selected after contract award must be provided **immediately** after their selection.

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Return Completed Form with Offer

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 4 OF 4

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

I hereby certify that I have read the *HUB Program Instructions and Information*, truthfully completed all applicable parts of this form, and **attached any necessary support documentation as required**. I fully understand that intentionally falsifying information on this document may result in my not receiving a contract award or termination of any resulting contract.

Name (print or type): _____

Title: _____

Signature: _____

Date: _____

E-mail address: _____

Contact person that will be in charge of invoicing for this project:

Name (print or type): _____

Title: _____

Date: _____

E-mail address: _____

Return Completed Form with Offer

**Orange County Texas
House Bill 89 Verification**

I, _____ (Person name), the undersigned
representative of _____ (Company or Business name) _____

_____ (hereafter referred to as company) being an adult over the age of eighteen (18) years
of age, after being duly sworn by the undersigned notary, do hereby depose and verify under oath that the
company named-above, under the provisions of Subtitle F, Title 10, Government Code Chapter 2270:

1. Does not boycott Israel currently; and
2. Will not boycott Israel during the term of the contract.

Pursuant to Section 2270.001, Texas Government Code:

*1. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any
action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with
Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not
include an action made for ordinary business purposes; and*

*2. "Company" means a for-profit sole proprietorship, organization, association, corporation, partnership,
joint venture, limited partnership, limited liability partnership, or any limited liability company, including a
wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or
business associations that exist to make a profit.*

DATE

SIGNATURE OF COMPANY REPRESENTATIVE

On this the _____ day of _____, 20____, personally appeared
_____, the above-named person, who after by me being duly
sworn, did swear and confirm that the above is true and correct.

NOTARY SEAL

NOTARY SIGNATURE

Date

Return Completed Form with Offer

ORANGE COUNTY TEXAS
SENATE BILL 252 CERTIFICATION

On this day I, Tim Funchess, the Purchasing Representative for Orange County, Texas, pursuant to Texas Government Code, Chapter 2252, Section 2252.152 and Section 2252.153, certify that I did review the website of the Comptroller of the State of Texas concerning the listing of companies that is identified under Section 806.051, Section 807.051 or Section 2253.253 and I have ascertained that the below-named company is not contained on said listing of companies which do business with Iran, Sudan or any Foreign Terrorist Organization.

Company Name

RFP or Vendor Number

CERTIFICATION CHECK PERFORMED BY:

Purchasing Representative

Date