

Attachment B: Non-Collusion Affidavit

This document is material to the contract and must be executed by the person responsible for determining the prices quoted in the proposal.

State of: _____

County of: _____ ss.

I state that I am _____ (Title) of _____
(Name of Firm) and that I am authorized to make this affidavit on behalf of my firm, and its owners, directors, and officers. I am the person responsible in my firm for the price(s) and the amount of this proposal.

I state that:

1. The price(s) and amount of this proposal have been arrived at independently and without consultation, communication, or agreement with any other contractor, proposer, or potential proposer.
2. Neither the price(s) nor the amount of this proposal have been disclosed to any other firm or person who is a proposer or potential proposer, and they will not be disclosed before the formal proposal opening.¹
3. No attempt has been made or will be made to induce any firm or person to refrain from proposing on this contract, or to submit a proposal higher than this proposal, or to submit any intentionally high or noncompetitive proposal or other form of complementary proposal.
4. The proposal of my firm is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive proposal.
5. _____ (Name of Firm), its affiliates, subsidiaries, officers, directors, and employees are not currently under investigation by any governmental agency and have not in the last three years been convicted or found liable for any act prohibited by state or federal law in any jurisdiction involving conspiracy or collusion with respect to bidding on any public contract.

I understand, and my firm understands that the above representations are material and important and will be relied upon by the **York Suburban School District** in awarding the contract(s) for which this proposal is submitted.

(Signature)

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20_____

Notary Public

My Commission Expires: _____

Attachment D: Minority Business Enterprise (MBE) Type

The York Suburban School District tracks the participation of diverse business entities. Please check the appropriate box(es) that describe your firm's ownership and certification status.

Firm Name: _____

1. Business Type (Check One):

- **Minority Business Enterprise (MBE)**: A for-profit business at least 51% owned and controlled by one or more minority group members.
- **Women Business Enterprise (WBE)**: A for-profit business at least 51% owned and controlled by one or more women.
- **Disadvantaged Business Enterprise (DBE)**: As defined by the PA Unified Certification Program (PA UCP).
- **Small Business Enterprise (SBE)**: As defined by the PA Department of General Services (DGS).
- **None of the Above / Not Applicable**

2. Minority Group Category (if MBE/DBE selected):

- Black American
- Hispanic American
- Asian-Pacific American
- Asian-Indian American
- Native American
- Other: _____

3. Certification Details:

Is your firm certified by a recognized agency (e.g., PA UCP, NMSDC, WBENC, or PA DGS)?

- Yes (Please attach a copy of your current certification)
- No

(Authorized Signature)
