

**CONTRACTOR RESPONSIBILITY QUESTIONNAIRE**

**PAGE 1 OF 2**

FOLLOWING OFFER OPENING AND PRIOR TO AWARD, THE CONTRACTING OFFICER MUST DETERMINE IF THE CONTRACTOR SELECTED FOR THE PROPOSED AWARD IS RESPONSIBLE WITHIN THE MEANING OF FAR 9.103. THE PRIMARY FACTORS WHICH INFLUENCE THIS DETERMINATION ARE THE FIRM'S ABILITY TO PERFORM THE REQUIRED WORK AND THE FIRM'S FINANCIAL CAPABILITY. TO ASSIST THE CONTRACTING OFFICER IN THIS DETERMINATION, PLEASE COMPLETE BOTH PAGES OF THIS FORM AND RETURN WITH YOUR OFFER. THE GOVERNMENT WILL TREAT ALL INFORMATION SUBMITTED ON THIS FORM AS CONFIDENTIAL.

I. LIST THE FOLLOWING INFORMATION FOR THREE PROJECTS WHICH YOU HAVE SUCCESSFULLY COMPLETED WITHIN THE PAST TWO YEARS, AND INVOLVES WORK SIMILAR TO THAT REQUIRED BY THIS INVITATION FOR OFFER.

1. DESCRIPTION: \_\_\_\_\_  
OWNER: \_\_\_\_\_  
PERSON OF CONTACT: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
AMOUNT: \_\_\_\_\_ DATE COMPLETED \_\_\_\_\_

2. DESCRIPTION: \_\_\_\_\_  
OWNER: \_\_\_\_\_  
PERSON OF CONTACT: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
AMOUNT: \_\_\_\_\_ DATE COMPLETED \_\_\_\_\_

3. DESCRIPTION: \_\_\_\_\_  
OWNER: \_\_\_\_\_  
PERSON OF CONTACT: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
AMOUNT: \_\_\_\_\_ DATE COMPLETED \_\_\_\_\_

II. THE CONTRACTOR MUST HAVE (1) ADEQUATE CAPITAL IN HAND TO PURCHASE MATERIALS, MEET WEEKLY PAYROLLS, AND COVER OTHER JOB EXPENSES, OR (2) CREDIT AVAILABLE FROM SUPPLIERS, BANKS, ETC. FOR THESE PURPOSES. PLEASE COMPLETE THE FOLLOWING:

A. I HAVE ADEQUATE FINANCIAL RESOURCES IN HAND TO PAY FOR:

( ) MATERIALS

( ) LABOR

( ) OTHER JOB EXPENSES

B. I HAVE CREDIT AVAILABLE FROM THE FOLLOWING FIRMS AND LENDING INSTITUTIONS: (LIST NAME AND ADDRESS)

1. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I CERTIFY THAT THE INFORMATION ABOVE IS CORRECT.**

**SIGNATURE:** \_\_\_\_\_

**NAME OF COMPANY:** \_\_\_\_\_

**BY:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_