

OHIO DEPARTMENT OF HEALTH

Bathing Beach Monitoring Project

Request for Proposals (RFP)  
RFP Number: Prev-30741

Notice: This RFP is not an offer or a contract. Contractor's written response to this RFP offering shall be considered as a formal offer to provide the services requested in this RFP.

Any contract awarded under this RFP will be funded by a grant awarded by U.S. Environmental Protection Agency; the grant, Beach Program Implementation Grant, CFDA#: 66.472. Any contract awarded requires the Contractor to provide products and/or services that are funded in whole or in part under said grant and therefore, the Contractor is responsible for ensuring that all applicable requirements, including but not limited to those set forth herein, are met.

Ohio Department of Health  
Division of Prevention  
246 North High Street  
Columbus, Ohio 43215

Release Date: March 5, 2010  
Proposal Due Date: March 31, 2010

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## 1. Introduction

The Ohio Department of Health (ODH) is seeking proposals from qualified agencies or organizations to perform beach monitoring (sampling) activities and public notification activities. If suitable offers are made in response to this RFP, ODH may enter into multiple contracts (the Contract) to have the selected Offeror or Offerors (the Contractor) perform all or part of the Project (the Work). This RFP provides details on what is required to submit a Proposal for the Work, how ODH will evaluate the Proposals, and what will be required of the Contractor in performing the Work.

## 2. Project Background

The Beaches Environmental Assessment and Coastal Health Act (BEACH Act) of 2000 amended the Clean Water Act to authorize the U.S. Environmental Protection Agency (EPA) to award grants to states for the purpose of developing and implementing a program to monitor, for pathogens and pathogen indicators, coastal recreation water adjacent to beaches that are used by the public and to notify the public if water quality standards for pathogens and pathogen indicators are exceeded.

The Ohio Department of Health (ODH) has received funding from the EPA for such activities during 2010.

Consistent with ODH's goal of providing incentive toward the development of localized beach water monitoring efforts, a number of contracts are being made available for the planning, development and implementation of local programs and activities consistent with the EPA's National Beach Guidance and Performance Criteria for Recreation Waters. ODH anticipates providing multiple awards.

Approximately \$84,000 is available for distribution to local governments adjacent to the Ohio/Lake Erie border with public bathing beaches within their jurisdictions. ODH's primary reason for this RFP is to secure contracts for the development and implementation of programs to monitor coastal recreation water adjacent to beaches that are used by the public for pathogen and pathogen indicators, and to notify the public if water quality standards for such pathogens and pathogen indicators are exceeded.

The EPA estimates that each year Americans take millions of trips to coastal areas and spend billions of dollars at beach destinations and communities. To help protect public health at the Nation's beaches, the Beaches Environmental Assessment and Coastal Health (BEACH) Act was signed into law in October 2000. The BEACH Act amended the Clean Water Act to reduce the risk of disease to users of the Nation's recreational waters.

The BEACH Act authorizes the EPA to award program development and implementation contracts to eligible governments to support microbiological testing and monitoring of coastal recreation waters, including the Great Lakes, which are adjacent to beaches or similar points of access used by the public. BEACH Act grants also provide support for

development and implementation of programs to notify the public of the potential exposure to disease-causing microorganisms in coastal recreation waters.

### 3. Contract Award, Negotiations and Duration

Contingent upon the availability of funds and approval by the Director of Health, multiple contracts will be awarded. The resultant contracts shall be in effect from approximately upon signature by ODH through September 30, 2010.

The successful Contractor will be required to contract with ODH to perform the work and deliver the deliverables as set forth in a contract substantially similar to the sample in Attachment A. ODH may, but is not required to, initiate negotiations with the potential successful Contractor or Contractors. The potential successful Contractors shall negotiate in good faith.

### 4. Qualifications of the Contractors

- 4.1 Contractors must be knowledgeable in water sampling techniques, able to interpret water sample results and provide requested information on the Lake Erie bathing beaches they are monitoring.
- 4.2 Qualified Contractors are individuals, agencies or organizations such as local health departments, local governmental agencies or academic institutions.
- 4.3 Contractors must have experience in collecting water samples and routine sanitary survey information.
- 4.4 Contractors must have knowledge of the BEACH Act grant and its requirements.
- 4.5 Contractors must have an ability to have all the water samples analyzed at an approved water testing laboratory.

### 5. Project Scope of Work and Deliverables

The successful Contractor(s) shall perform all of the following activities for which there is an executed contract in consultation with, and with the approval of the ODH Contract Manager:

#### 5.1 Scope of Work

5.1.1 The successful Contractor shall the Work select by the Contractor in its proposal from one or more of the Performance criteria listed below:

#### 5.1.2 Performance Criteria

Consistent with the EPA National Beach Guidance and Performance Criteria for Grants, activities for a contract awarded under this RFP must comply with any one or more of the following performance criteria for the implementation of monitoring, assessment, and notification programs:

5.1.2.1 Development of a risk-based beach evaluation and classification plan.

This performance criterion requires the development of a plan to be applied to coastal recreation waters which describes the factors used in its evaluation and classification process and explains how the recreational waters and beaches are ranked as a result of the process. The process must result in the identification of the coastal recreation waters, identification of beaches or similar points of access used by the public, identification and review of available information describing (1) the potential risk to human health presented by pathogens and (2) the use of the beach, and the method of notification when the ranking of beaches changes and alters the sampling frequency at beaches.

5.1.2.2 Development of a tiered monitoring plan

This performance criterion requires the development of an adequately tiered monitoring plan to address the frequency and location of monitoring and assessment of coastal recreation waters based on the periods of recreational use of the waters, the nature and extent of use during certain periods, the proximity of the waters to known point sources and non-point sources of pollution, and any effect of storm events on the waters. In the plan, adequately address required monitoring elements: public health, number of beaches, existing monitoring data, public review, adaptive monitoring approach, and quality control. Develop appropriate quality control policies and procedures.

5.1.2.3 Monitoring report submission

This performance criterion requires the development of a mechanism to collect and report monitoring data in timely reports to ODH, the public, EPA, and other agencies. Reported data must be consistent with the list of data elements included in the “National Beach Guidance and Required Performance Criteria for Grants”.

5.1.2.4 Methods and assessment procedures

This performance criterion requires the development of detailed methods and assessment procedures for detecting levels of pathogens and pathogen indicators that are harmful to human health in coastal recreation areas; provide documentation to support the validity of methods other than those currently recommended or approved by EPA; and identify assessment procedures for identifying short-term increases in pathogens and pathogen indicators that are harmful to human health in coastal recreation areas.

5.1.2.5 Public Notification and Risk Communication Plan

This performance criterion requires the development of an overall public notification and risk communication plan. The plan must describe public notification efforts and measures to inform the public of the potential risks associated with water contact activities in the coastal recreation waters that do not meet applicable water quality standards; identify measures to notify the public, ODH, EPA, and other agencies when indicator bacteria levels exceed a water quality standard; and identify the notification report submission and delegation process.

#### 5.1.2.6 Measures to notify ODH and EPA

This performance criterion requires the development of measures for prompt communication of the occurrence, nature, location, pollutants involved, and extent of any exceeding of, or likelihood of exceeding, applicable water quality standards for pathogens and pathogen indicators. The plan must identify how this information will be promptly communicated to ODH and EPA.

#### 5.1.2.7 Measures to notify the public

This performance criterion concerns a plan that addresses the posting of signs at beaches or similar points of access, or functionally equivalent communication measures that are sufficient to give notice to the public when a water quality standard has been exceeded; the issuance of a public notice or immediate resample for bacterial exceedance of a water quality standard; and public notification of a water quality standard exceedance when there is no reason to doubt the accuracy of a sample.

#### 5.1.2.8 Notification report submission

This performance criterion requires the development of a method for compiling notification plans in timely reports for submission to ODH, the public, EPA, and other agencies. Such plans must report the actions taken to notify the public when water quality standards are exceeded; promptly report notification data to the public; and annually submit required notification data elements such as advisory date, location, duration, and cause to ODH and EPA. Reported data must be consistent with the list of data elements included in the “National Beach Guidance and Required Performance Criteria for Grants”.

#### 5.1.2.9 Public evaluation of program

This performance criterion requires the development of a plan to provide the public with an opportunity to review and comment on the following components of a beach monitoring, assessment and notification program: beach evaluation and classification process; sampling design and monitoring plan, including sampling

location and sampling frequency; public notification and risk communication plan, including methods to notify the public of a swimming advisory.

## 5.2 Deliverables

- 5.2.1 The successful Contractor shall deliver to ODH by June 30, 2010, a written status report of all efforts to fulfill contract requirements. A final report shall be prepared and submitted in writing or electronically to ODH no later than October 24, 2010.

## 6. Proposal Format

All Contractors desiring to submit a proposal shall submit a proposal directly responsive to the terms and conditions of this RFP. If a Contractor chooses to submit an alternative proposal, they must, at the same time, submit a proposal directly responsive hereto for any alternate to even be considered. Such alternate proposal shall clearly identify why the acceptance of the proposal would be advantageous to ODH. Any deviations from the terms and conditions of the RFP, as well as the comparative advantage to ODH shall be clearly identified and explicitly defined. ODH reserves the right to amend the RFP to allow all offerors an opportunity to submit revised proposals based on the revised requirements. Proposals shall be submitted with an original with three copies and an electronic version in Microsoft Word format. Proposals shall contain the sections listed below separated by tabbed and labeled dividers.

### 6.1 Addenda to the RFP.

- 6.1.1 If ODH decides to revise this RFP before the Proposal due date, addenda will be announced on the Ohio Gateway Web site. When an addendum to this RFP is necessary, ODH may extend the Proposal due date through an announcement on the Ohio Gateway Web site. Addendum announcements may be provided any time before 5:00 p.m. on the day before the proposal is due. It is the responsibility of each prospective Contractor to check for announcements and other current information regarding the RFP.
- 6.1.2 After the submission of Proposals, addenda will be distributed only to those Contractors whose submissions are under active consideration. When ODH makes an addendum to the RFP after Proposals have been submitted, ODH will permit Contractors to withdraw their proposals. This withdrawal option will allow any Contractor to remove its proposal from active consideration should the Contractor feel that the addendum changes the nature of the transaction so much that the Contractor's proposal is no longer in its interests. Alternatively, ODH may allow Contractors that have proposals under active consideration to modify their proposals in response to the addendum.
- 6.1.3 If, however, ODH makes an addendum after the Proposal Due Date, ODH will tell all Contractors whose proposals are under active consideration whether they

have the option to modify their proposals in response to the addendum. Any time ODH amends the RFP after the Proposal Due Date, a Contractor will have the option to withdraw its proposal even if ODH permits modifications to the proposals. If the Contractors are allowed to modify their proposals, ODH may limit the nature and scope of the modifications. Unless otherwise stated in ODH's notice, modifications and withdrawals must be made in writing and must be submitted within 10 business days after the addendum is issued. If this RFP provides for a negotiation phase, this procedure will not apply to changes negotiated during that phase. Withdrawals and modifications must be made in writing and submitted to ODH at the address and in the same manner required for the submission of the original proposals. Any modification that is broader in scope than ODH has authorized may be rejected and treated as a withdrawal of the Contractor's proposal

## 6.2 Proposal Cover Sheet

6.2.1 Contractor name, address and federal tax identification number.

6.2.2 Name of Contractor's contact person, title, address, telephone and fax numbers and e-mail address.

6.2.3 Amount of total bid

6.2.4 RFP number and project title.

## 6.3 Table of Contents

## 6.4 Technical Proposal

### 6.4.1 Profile of the Contractor

6.4.1.1 The technical proposal shall include a description of the Contractor's experience and expertise conducting similar projects and include a description of how all of the requirements specific to this project will be implemented, including each item under Section 5.1.2. The description must include how the Contractor meets the qualifications set forth in section 4 above.

6.4.1.2 The technical proposal shall identify and describe the proposed project, its scope, goals, objectives, anticipated outcomes, and how it relates to one or more of the EPA Performance Criteria; identification of key project personnel, their responsibilities to the project, and how they fit into the bidder's organizational structure. A description of contingency plans for completing the project, should the key personnel become unavailable for any reason.

6.4.1.3 Identification and description of the Contractor's subcontractors to be used, if any. Subcontractors must be approved by ODH. However Contractor may

subcontract without ODH's approval for the purchase of articles, supplies, components, or special mechanical services that do not involve the type of work or services described in the Scope of Work or Deliverables in this RFP, but which are required for its satisfactory completion.

6.4.1.4 Contractors are cautioned that failure to submit at the appropriate level of detail for the information required in the sections detailed herein will result in a determination that the Contractor's proposal is non-responsive. Such a determination may result in ineligibility for contract award. If a requirement can be exceeded by the Contractor, the proposal should state the degree to which the requirement will be exceeded and how this will be accomplished. If a requirement cannot be fully met, the Contractor must state the reasons and must provide alternatives that can accomplish all the requirements specified.

6.4.1.5 Proposals should be prepared simply and economically, providing a straightforward, concise, yet complete description of the contractor's capabilities to satisfy the contract. Emphasis should be on completeness and on specificity and clarity of content.

## 6.5 Cost Proposal

6.5.1 Contractors shall include an itemized budget for the work proposed in response to this RFP, to include a breakdown of all costs reflected in the proposal; e.g., personnel, materials, equipment.

## 6.6 Other submissions

6.6.1 Contractor shall include a statement that it does not take exception to the terms of the proposed contract. If the Contractor does take an exception, any exceptions must be included in the Contractor's proposal. Note: Taking exception to the terms of the contract or RFP may be grounds for eliminating the Contractor from consideration for award of a contract.

6.6.2 IRS Form W-9 request for Taxpayer Identification Number and Certification – Enclosed is IRS Form W-9 (Attachment B). Please complete all applicable sections of the document including taxpayer type, a valid tax identification number, and your signature. The information you provide must match how you are registered with the IRS. Should you require additional assistance in completing the W-9 form, please contact the IRS at 1-800-829-1040.

6.6.3 Vendor Information Form (Attachment C) (OBM-3456-(rev. 5/2007) - Please complete the Vendor Information Form in order to assure an accurate, up-to-date record of company information. Please verify all fields are complete. Additionally, verify that information contained on the Form W-9 matches that provided on the Vendor Information Form. Specifically, legal business name, taxpayer ID # (TIN), business type/business entity and address.

6.6.4 Declaration Regarding Material Assistance/Nonassistance to a Terrorist Organization (DMA). If the Contractor has already precertified that the Contractor is in compliance with the Declaration Regarding Material Assistance/Nonassistance to a Terrorist Organization pursuant to section 2909.33 of the Ohio Revised Code (ORC) with the Ohio Department of Public Safety at the Ohio Business Gateway, then the Contractor must provide a statement of having done so. Such precertification is valid for all state agencies and is good for up to two years or the end of the current biennium, which ever is shorter. However, the Contractor may comply with the statutory requirement by means of signing off on its contract with ODH.

## 7. Evaluation of Proposals

7.1 All proposals will be evaluated and scored by a selection committee. The technical and cost portions of the proposal will be reviewed and scored according to the following criteria; maximum points for each category are listed below. All proposals will be ranked based upon bid amount relative to available funding, completeness and clarity of project, relationship of project to the EPA Performance Criteria, and ability of applicant to complete the project within the time period provided. Maximum points for each category are listed below:

Total points:	100
1. Bid Amount/lowest bid	10
2. Scope of project	20
3. Completeness and clarity of project	20
4. Adherence to EPA Performance Criteria	30
5. Overall quality of proposal	20

Based on its evaluation of the proposals, the ODH selection committee will forward a recommendation to the Director of the Ohio Department of Health. The Director will make a selection and his decision is final. Awards will be based on overall rating and best value to ODH.

## 8. Submission of Proposals

8.1 To be considered, an original and three copies of the proposal must be submitted no later than 4:00 p.m. on March 31, 2010. No FAX proposals will be accepted. Proposals may be mailed or delivered to:

Ohio Department of Health  
Office of Financial Affairs  
Attention: Paul Maragos  
246 North High Street, 4th Floor  
Columbus, Ohio 43215

- 8.2 From the issuance date of this RFP, until a contract is awarded to a Contractor, there may be no communications concerning the RFP between any Contractor who expects to submit a proposal and any employee of ODH involved in the issuing of the RFP, or other state employee who is in any way involved in the ODH project. The only exception to this prohibition is communications provided through the submission of written questions per 8.3 below and if required, communications in a Contractor interview.
- 8.3 If a Contractor finds any perceived conflict, error, omission or discrepancy in the RFP documents, the Contractor shall submit a written request for interpretation. Questions can be submitted using the DAS website where the RFP is located. All questions must be submitted by 4:00 pm on March 15, 2010. Answers to the questions will be posted to the Ohio Department of Administrative Services website: <http://procure.ohio.gov/proc/searchProcOpps.asp> by March 19, 2010. In order to submit and see responses to questions, you need to search for the procurement number for this item, which is DOH-Prev30741. Telephone inquiries will not be accepted.
9. Protest Procedure
- 9.1 Any potential, or actual, Contractor objecting to an award of a contract resulting from the issuance of this RFP may file a protest of the award of the contract, or any other matter relating to the process of soliciting the proposals. Such a protest must comply with the following guidelines:
- 9.2 A protest may be filed by a prospective or actual Contractor objecting to the award of a contract resulting from this RFP. The protest shall be in writing and shall contain the following information:
- 9.2.1 The name, address, and telephone number of the protestor.
- 9.2.2 The name and number of the RFP being protested.
- 9.2.3 A detailed statement of the legal and factual grounds for the protest, including copies of any relevant documents.
- 9.2.4 A request for a ruling by ODH.
- 9.2.5 A statement as to the form of relief requested from ODH.
- 9.2.6 Any other information the protestor believes to be essential to the determination of the factual and legal questions at issue in the written protest.
- 9.3 A protest shall be considered timely by ODH, if ODH's Office of General Counsel received it, within the following periods:

- 9.3.1 A protest based upon alleged improprieties in the issuance of the RFP or any other event preceding the closing date for receipt of proposals which are apparent or should be apparent prior to the closing date for receipt of proposals shall be filed no later than 4:00 p.m. the closing date for receipt of proposals, which is March 31, 2010.
- 9.3.2 If the protest relates to the announced intent to award a contract, the protest shall be filed no later than 3:00 pm of the tenth (10th) business day after the issuance of the award the contract.
- 9.4 An untimely protest may be considered if ODH determines that the protest raises issues significant to ODH's procurement system. An untimely protest is one received by ODH's Office of General Counsel after the time period set forth in paragraph 2 of this section.
- 9.5 All protests must be filed with the following:
- Chief Legal Counsel  
Ohio Department of Health  
246 North High Street, 7th floor  
Columbus, Ohio 43215
- 9.6 When a timely protest is filed, a contract award shall not proceed until a decision on the protest is issued or the matter is otherwise resolved, unless the Director of ODH determines that a delay will severely disadvantage ODH. The Contractor(s) who would have been awarded the contract shall be notified of the receipt of the protest.
- 9.7. ODH shall issue written decisions on all timely protests and shall notify any Contractor who filed an untimely protest as to whether or not the protest will be considered.

## 10. Certifications

- 10.1 The successful Contractor will be required to complete a certification of Declaration of Material Assistance form or precertify as required by Ohio Revised code section 2909.33.
- 10.2. The successful Contractor will be required to complete an Affirmative Action Program Verification Form in accordance with ORC 125.111. Before a contract can be awarded or renewed, an Affirmative Action Program Verification Form must be submitted to the DAS Equal Opportunity Division to comply with the affirmative action requirements. Affirmative Action Verification Forms and approved Affirmative Action Plans can be found by going to the Equal Opportunity Departments web site:

<https://ohiobusinessgateway.ohio.gov/OBG/Membership/Security.mvc/Login#MainContainer>.

Users will need to login with their current Username and Password or create a new account.

11. Other Conditions
  - 11.1 ODH is under no obligation to pay any costs incurred in the preparation of proposal submissions.
  - 11.2 ODH reserves the right to reject any and all proposals where the Contractor fails to meet the terms and conditions of the RFP including, but not limited to, standards, specifications, and requirements.
  - 11.3 ODH may cancel and/or re-issue the RFP, in whole or in part, when the services offered are not in compliance with the requirements, specifications, and terms and conditions set forth in the RFP, or pricing offered is considered to be excessive in comparison with existing market conditions or exceeds the available funds of ODH, or it is determined that award of a contract would not be in the best interests of ODH and/or the state.
  - 11.4 ODH reserves the right to waive minor defects and to provide Contractors with the opportunity to correct material defects when no prejudice to the rights of other Contractors or the public will result. Contractors shall be afforded fair and equal treatment regarding any clarification and/or correction.
  - 11.5 ODH reserves the right to amend or withdraw the RFP any time prior to the award of a contract. The Contractor may withdraw a response to the RFP any time prior to the award of a contract.
  - 11.6 All products which result from the proposed contractual agreement will be the sole property of ODH.
  - 11.7 All bids will be considered firm and in the event a contract ensues as a result of this RFP, the Contractor selected will be required to fulfill the contractual obligations at the amount quoted in the cost proposal.
  - 11.8 Pursuant to Section 149.43 of the Ohio Revised Code, the proposal may be considered a public record and be released upon request, but not before the closing and evaluation of bids pursuant to Section 125.071(C) of the Ohio Revised Code.
  - 11.9 ODH may, from time to time as it deems appropriate, communicate specific instructions and requests to the successful Contractor or Contractors concerning

the performance of the work described in the RFP and/or the contract. Upon such notice and within ten (10) days after receipt of instructions, the successful Contractor shall comply with such instructions and fulfill such requests to the satisfaction of ODH. It is expressly understood by ODH and the successful Contractor that these instructions and requests are for the sole purpose of ensuring satisfactory completion of the work described in the RFP and/or the contract. They are not intended to amend or alter the RFP and/or contract or any part thereof.

- 11.10 The state reserves the right not to award a contract under this RFP. The state reserves the right to award only one or multiple contracts under this RFP.

12 - Attachments

Attachment A – Sample Contract

**PERSONAL SERVICE CONTRACT  
BY AND BETWEEN  
THE OHIO DEPARTMENT OF HEALTH  
AND  
[NAME OF CONTRACTOR]**

**PREAMBLE**

The Ohio Department of Health (hereinafter referred to as "**ODH**"), whose address is 246 North High Street, Columbus, Ohio 43215, and **[NAME OF CONTRACTOR]** (hereinafter referred to as the "**CONTRACTOR**"), whose address is **[ADDRESS OF CONTRACTOR]**, hereby enter into this contract. For the purposes of this contract, the term "party" means **ODH** and the **CONTRACTOR** respectively and "parties" means **ODH** and **CONTRACTOR** collectively. **ODH** and the **CONTRACTOR**, in consideration of the mutual promises expressed below and intending to be legally bound, agree to the following provisions.

**ARTICLE I  
Scope of Work and Deliverables**

- A. The **CONTRACTOR** shall provide the services and perform the work as specified in the following:
  - 1. As necessary, report to **ODH's** contract manager, **[NAME OF ODH POINT OF CONTACT]**, the Ohio Department of Health, 246 North High Street, Columbus, Ohio 43215 (Telephone Number (614) **XXX-XXXX**; FAX Number (614) **XXX-XXXX**; Email: **XXXXXXXXXXXX**).
  - 2. **[INSERT HERE AND IN ADDITIONAL SUBPARAGRAPHS, IF NECESSARY, A DESCRIPTION OF THE WORK TO BE PERFORMED OR SERVICES TO BE PROVIDED BY THE CONTRACTOR]**
- B. The **CONTRACTOR** shall furnish its own support staff and services as necessary for the satisfactory performance of the work described in **ARTICLE I, Section A**, above. Unless otherwise specified in this contract, **ODH** will not provide any staff, services, or material to the **CONTRACTOR** for the purpose of assisting the **CONTRACTOR** in the performance of this contract.
- C. **ODH** may, from time to time as it deems appropriate, communicate specific instructions and requests to the **CONTRACTOR** concerning the performance of the work described in this contract. Upon such notice and within ten (10) days after receipt of instructions, the **CONTRACTOR** shall comply with such instructions and fulfill such requests to the satisfaction of **ODH**. It is expressly understood by the parties that these instructions and requests are for the sole purpose of ensuring satisfactory completion of the work described in this contract. They are not intended to amend or alter this contract or any part thereof. All such instructions and requests shall be communicated to the **CONTRACTOR** by the **ODH** contract manager.

- D. The **CONTRACTOR** shall consult with the **ODH** contract manager as necessary to assure mutual understanding of the work to be performed and the satisfactory completion thereof.

## **ARTICLE II**

### **Time of Performance**

- A. Upon approval by the Director of **ODH** and, if required, the Controlling Board, this contract shall be in effect from [**START DATE**], or upon execution by both parties, whichever is later, through [**END DATE**], unless this contract is suspended or terminated pursuant to **ARTICLE XI** prior to the termination date.
- B. It is expressly understood by both **ODH** and the **CONTRACTOR** that this contract shall not be valid and enforceable until the Director of the Office of Budget and Management certifies, pursuant to section 126.07 of the Ohio Revised Code (ORC), that there is a balance in the appropriation not already encumbered to pay obligations resulting from this contract.
- C. The **CONTRACTOR** shall neither perform work nor submit an invoice for payment for work performed under this contract for any time period prior to receipt of written notification from the **ODH** contract manager that the requirements of section 126.07 and, if applicable, section 127.16 of the ORC have been met.
- D. The **CONTRACTOR** shall neither perform work nor submit an invoice for payment for work performed under this contract for any time period after the termination date set forth in **ARTICLE II, Section A**, above.

## **ARTICLE III**

### **Compensation for Services**

- A. In consideration of the services provided pursuant to **ARTICLE I** of this contract, **ODH** agrees to pay compensation (**Input payment terms here**) for the contract period set forth in **ARTICLE II**. The **CONTRACTOR** shall monitor the hours worked under this contract and shall not accept an assignment under the contract if it will cause or is reasonably likely to cause the total amount paid under the contract for the contract period specified in **ARTICLE II** to exceed the maximum allowable compensation for services. The **CONTRACTOR** hereby waives the interest provisions of section 126.30 of the ORC.
- B. “There shall be no separate reimbursement for travel and related expenses pursuant to this contract.” **OR** Reimbursement for travel and other related expenses incurred by the **CONTRACTOR** is limited to a maximum of \$**XXX**, which is included in the total compensation set forth in **ARTICLE III, Section A**, above. Reimbursement for travel and other related expenses shall be limited to actual and necessary expenses as specified in sections 126.31 and 126.32 of the ORC and the provisions of section 126-1-02 of the Ohio Administrative Code (OAC). The **CONTRACTOR** shall not submit claims for expenses which do not meet the requirements of this section. The **CONTRACTOR** shall submit all claims to the **ODH** contract manager for approval prior to submitting a claim for reimbursement under this section. Except as set forth in this section, no other expenses incurred by the **CONTRACTOR** will be reimbursed by **ODH**. For the purposes of determining allowable travel expenses, the **CONTRACTOR's** headquarters shall be Franklin County, Ohio. [**The above paragraph is then deleted.**]

- C. The **CONTRACTOR** shall invoice **ODH** monthly [OR the word “monthly” shall be deleted if the services are “one time only” services such as a program presentation or if the payments are to occur upon the completion of scheduled deliverables, in which case this clause shall include that payment schedule.] for services provided by the **CONTRACTOR**. An itemized statement listing the services provided, the dates services were provided, and the amount of payment due shall accompany the invoice. Invoices shall be sent to **ODH**, ATTN: Accounts Payable, P.O. Box 118, Columbus, Ohio 43216-0118. **ODH** will reimburse the **CONTRACTOR** within forty-five (45) days of receipt of a valid invoice for the amount of payment due. **ODH** shall return any invalid or incomplete invoice to the **CONTRACTOR** within fifteen (15) days after **ODH** receives the invoice. An explanation will accompany the invoice that states the reason for return and any information needed to correct the invoice. Final invoices for services provided under this contract shall be submitted by the **CONTRACTOR** no later than thirty (30) days following the termination of the contract.
- D. Subject to the provisions of sections 126.07 and 131.33 of the ORC, which shall at all times govern this contract, **ODH** represents that:
1. It intends to maintain this agreement for the full period set forth herein and has no reason to believe that it will not have sufficient funds to enable it to make all payments due hereunder during such period; and
  2. It will use its best efforts to obtain the appropriation of any necessary funds during the term of this agreement.

However, it is understood by the **CONTRACTOR** that the availability of funds is contingent on appropriations made by the Ohio General Assembly and, if applicable, the federal funding source. If the Ohio General Assembly or the federal funding source fails at any time to continue funding **ODH** for the payments due hereunder, this agreement is terminated as of the date funding expires without further obligation of **ODH** or the State of Ohio.

- E. **ODH** will not compensate the **CONTRACTOR** for any work performed prior to receipt of written notification from the **ODH** contract manager that the requirements of section 126.07 and, if applicable, section 127.16 of the ORC have been met as set forth in **ARTICLE II, Sections B and C**. **ODH** will not compensate the **CONTRACTOR** for any work performed after the termination date set forth in **ARTICLE II, Section A**.

#### **ARTICLE IV Independent Contractor**

- A. No agency, employment, joint venture or partnership has been or will be created between the parties hereto pursuant to the terms and conditions of this agreement. Inasmuch as **ODH** is interested in the **CONTRACTOR**'s end product, **ODH** does not control the manner in which the **CONTRACTOR** performs this contract. **ODH** is not liable for the workers' compensation or unemployment compensation payments required by Chapters 4123. and 4141. of the ORC, respectively. In addition, the **CONTRACTOR** assumes responsibility for tax liabilities that result from compensation paid to the **CONTRACTOR** by **ODH**. **ODH** will report any payment made under this contract to the Internal Revenue Service on Form 1099.

- B. No provision contained in this contract shall be construed as entitling the **CONTRACTOR** to participate in hospital plans, medical plans, sick leave benefits, vacation, and other benefits available to employees of **ODH** or to become a member of the Public Employees Retirement System (Chapter 145. of the ORC).

**ARTICLE V**  
**Conflict of Interest and Ethics Laws**

- A. The **CONTRACTOR** hereby covenants that neither the **CONTRACTOR** nor any officer, member or employee of the **CONTRACTOR** has any interest, personal or otherwise, direct or indirect, which is incompatible or in conflict with or would compromise in any manner or degree with the discharge and fulfillment of his or her functions and responsibilities under this contract.
- B. Neither the **CONTRACTOR** nor any officer, member or employee of the **CONTRACTOR** shall, prior to the completion of such work and payment for such work, acquire any interest, personal or otherwise, direct or indirect, which is incompatible or in conflict with or would compromise in any manner or degree with the discharge and fulfillment of his or her functions and responsibilities with respect to the carrying out of such work.
- C. The **CONTRACTOR** shall not promise or give to any **ODH** employee anything of value that is of such a character as to manifest a substantial and improper influence upon the employee with respect to his or her duties. The **CONTRACTOR** shall not solicit an **ODH** employee to violate any **ODH** rule or policy relating to the conduct of contracting parties or to violate sections 102.03, 102.04 or 2921.42 of the ORC.
- D. The **CONTRACTOR** hereby covenants that the **CONTRACTOR** and any officer, member or employee of the **CONTRACTOR** are in compliance with section 102.04 of the ORC and that if the **CONTRACTOR** is required to file a statement pursuant to section 102.04(D) (2) of the ORC, such statement has been filed with the **ODH** General Counsel in addition to any other required filings.
- E. The **CONTRACTOR** hereby certifies compliance with the executive agency lobbying requirements of sections 121.60 to 121.69 of the ORC.
- F. The **CONTRACTOR** hereby certifies and affirms that, as applicable to the **CONTRACTOR**, no party listed in Division (I) or (J) of section 3517.13 of the ORC or spouse of such party has made, as an individual, within the two previous calendar years, one or more contributions in excess of \$1,000.00 to the Governor or to his campaign committees. If it is determined that the **CONTRACTOR's** certification of this requirement is false or misleading, notwithstanding any criminal or civil liabilities imposed by law, the **CONTRACTOR** shall return to **ODH** all monies paid to the **CONTRACTOR** under this contract. The provisions of this section shall survive the expiration or termination of this contract.
- G. In accordance with the Governor's Executive Order 2007-01S, **CONTRACTOR**, by signature on this contract, certifies: (1) **CONTRACTOR** has reviewed and understands the Governor's Executive Order 2007-01S; (2) **CONTRACTOR** has reviewed and understands the Ohio ethics and conflict of interest laws; and (3) **CONTRACTOR** will take no action inconsistent with those laws and this Executive Order. The **CONTRACTOR** understands

that failure to comply with Executive Order 2007-01S is, in itself, grounds for termination of this contract and may result in the loss of other contracts or grants with the State of Ohio.

**ARTICLE VI  
Equal Employment Opportunity**

- A. In carrying out this agreement, the **CONTRACTOR** shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, handicap, disability, national origin, ancestry, veteran status, or any other factor specified in section 125.111 of the ORC, in the Civil Rights Act of 1964, as amended, or in section 504 of the Rehabilitation Act of 1973, as amended, and in any subsequent legislation pertaining to civil rights.
- B. The **CONTRACTOR** shall incorporate the foregoing requirements of **ARTICLE VI, Section A** in all of its contracts for performance of any of the work prescribed herein, and shall require all of its subcontractors for any part of such work to incorporate such requirements in all subcontracts for such work.

**ARTICLE VII  
“Sweatshop Free” Certification**

The **CONTRACTOR** hereby certifies that all facilities used for the production of the supplies or performance of services offered in this contract are in compliance with applicable domestic labor, employment, health and safety, environmental and building laws. This certification applies to any and all suppliers and/or subcontractors used by the **CONTRACTOR** in furnishing the supplies or services pursuant to this contract. If it is determined that the **CONTRACTOR's** certification of this requirement is false or misleading, then the **CONTRACTOR** understands that it shall be grounds for the termination of this contract and may result in the loss of other contracts or grants with the State of Ohio.

**ARTICLE VIII  
Records, Documents and Information**

All records, documents, writings or other information produced or used by the **CONTRACTOR** in the performance of this contract shall be treated according to the following terms:

- A. All **ODH** information which, under the laws of the State of Ohio, is classified as public or private, will be treated as such by **CONTRACTOR**. Where there is a question as to whether information is public or private, **ODH** shall make the final determination. The **CONTRACTOR** shall not use any information, systems, or records made available to it for any purpose other than to fulfill the contractual duties specified herein. The **CONTRACTOR** agrees to be bound by the same standards of confidentiality that apply to the employees of **ODH** and the State of Ohio. The terms of this section shall be included in any subcontracts executed by the **CONTRACTOR** for work under this contract.
- B. All proprietary information of the **CONTRACTOR** shall be held to be strictly confidential by **ODH**. Proprietary information is information which, if made public, would put the **CONTRACTOR** at a disadvantage in the market place and trade of which the **CONTRACTOR** is a part. The **CONTRACTOR** is responsible for notifying **ODH** of the nature of the information prior to its release to **ODH**. **ODH** reserves the right to require

reasonable evidence of the **CONTRACTOR's** assertion of the proprietary nature of any information to be provided.

- C. All records relating to costs, work performed and supporting documentation for invoices submitted to **ODH** by the **CONTRACTOR** shall be retained and made available by the **CONTRACTOR** for audit by the State of Ohio (including, but not limited to, **ODH**, the Auditor of the State of Ohio, the Inspector General or duly authorized law enforcement officials) and agencies of the United States government for a minimum of three years after payment for work performed under this contract. If an audit, litigation, or other action is initiated during this time period, the **CONTRACTOR** shall retain such records until the action is concluded and all issues resolved or the three years end, whichever is later.

#### **ARTICLE IX**

##### **Rights in Deliverables, Data and Copyrights**

The Deliverables provided by the **CONTRACTOR** under **ARTICLE I** and any item produced under this contract, including any documents, data, photographs and negatives, electronic reports, records, software, source code, or other media, shall become the property of **ODH** which shall have an unrestricted right to reproduce, distribute, modify, maintain, and use the Deliverables. The **CONTRACTOR** shall not obtain copyright, patent, or other proprietary protection for the Deliverables. The **CONTRACTOR** shall not include in any Deliverable any copyrighted matter, unless the copyright owner gives prior written approval to use such copyrighted matter.

#### **ARTICLE X**

##### **Disclosure of Personal Health Information**

- A. **CONTRACTOR** hereby agrees that the information provided or made available by **ODH** shall not be used or disclosed other than as permitted or required by the contract or as required by law. **CONTRACTOR** will establish and maintain appropriate safeguards to prevent any use or disclosure of the information, other than as provided for by this contract [ref. 45 C.F.R. §164.504(e)(2)(ii)(A)(B)]. **CONTRACTOR** shall immediately report to **ODH** any discovery of use or disclosure of information not provided for or allowed by the contract.
- B. **CONTRACTOR** hereby agrees that anytime information is provided or made available to any subcontractor or agent, **CONTRACTOR** must enter into a subcontract with the subcontractor or agent that contains the same terms, conditions, and restrictions on the use and disclosure of information as contained in this contract. **CONTRACTOR** must obtain **ODH** approval prior to entering into such agreements. Further, **CONTRACTOR** agrees to make available and provide right of access to an individual of their protected health information when that protected health information is obtained in the performance of **CONTRACTOR's** obligations under this contract.

#### **ARTICLE XI**

##### **Suspension and Termination**

- A. **ODH** may suspend or terminate this contract for any reason thirty (30) days after delivery of written notice to the **CONTRACTOR**. **ODH** may suspend or terminate this contract immediately after delivery of written notice to the **CONTRACTOR** if **ODH**:
1. Discovers any illegal conduct on the part of the **CONTRACTOR**;

2. Discovers a violation of **ARTICLE V** or **ARTICLE XVI**;
  3. Is subject to a loss of funding as set forth in **ARTICLE III, Section D**; or
  4. Discovers a petition in bankruptcy or similar proceeding has been filed by or against the **CONTRACTOR**. If at any time during the contractual period a bankruptcy or similar proceeding has been filed by or against the **CONTRACTOR**, the **CONTRACTOR** shall immediately notify **ODH** of the filing.
- B. The **CONTRACTOR**, upon receipt of notice of suspension or termination, shall cease work on the suspended or terminated activities under this contract, suspend or terminate any subcontracts relating to such suspended or terminated activities, take all necessary or appropriate steps to limit disbursements and minimize costs, and furnish a report, as of the date of receipt of notice of suspension or termination describing the status of all work under this contract, including without limitation, results accomplished, conclusions resulting therefrom, and such other matters as **ODH** may require.
- C. In the event of suspension or termination under this Article, the **CONTRACTOR** shall be entitled to compensation, upon submission of a proper invoice, for the work performed prior to receipt of notice of termination or suspension, which shall be calculated by **ODH** based on the rate set forth in **ARTICLE III**, less any funds previously paid by or on behalf of **ODH**. In the case of services for which the **CONTRACTOR** charges a flat rate, compensation shall be based on a reasonable percentage of the total services performed, as determined by **ODH**, less any funds previously paid by or on behalf of **ODH**. **ODH** shall not be liable for any further claims, and the claims submitted by the **CONTRACTOR** shall not exceed the total amount of compensation allowed by this contract.

#### **ARTICLE XII Breach or Default**

- A. Upon breach or default by the **CONTRACTOR** of any of the provisions, obligations or duties embodied in this contract, **ODH** may exercise all administrative, contractual, equitable or legal remedies available, without limitation. The waiver of any occurrence of breach or default is not a waiver of subsequent occurrences, and **ODH** retains the right to exercise all remedies hereinabove mentioned.
- B. If **ODH** or the **CONTRACTOR** fails to perform an obligation or obligations under this contract and thereafter such failure is waived by the other party, such waiver shall be limited to the particular failure so waived and shall not be deemed to waive other failures hereunder. Waiver by **ODH** shall not be effective unless it is in writing and signed by the **ODH** contract manager.

#### **ARTICLE XIII Amendments**

This writing constitutes the entire agreement between the parties with respect to all matters herein. This contract may be amended only by a writing signed by both parties. However, it is agreed by the parties that any amendments to laws or regulations cited herein will result in the correlative modification of this contract, without the necessity for executing written amendments.

Any written amendments to this contract shall be prospective in nature. When a new or different term or condition is added, additional consideration is not necessary to bind the parties.

**ARTICLE XIV  
Limitation of Liability**

- A. The **CONTRACTOR** holds **ODH** harmless from any and all liability, suits, losses, judgments, damages, or any other demands arising out of the actions or omissions of the **CONTRACTOR** while performing this contract.
- B. **ODH's** liability for damages, whether in contract or in tort, shall not exceed the total amount of compensation payable to the **CONTRACTOR** under **ARTICLE III** or the amount of direct damages incurred by the **CONTRACTOR**, whichever is less. The **CONTRACTOR's** sole and exclusive remedies for **ODH's** failure to perform under the contract shall be as set forth in this article. In no event shall **ODH** be liable for any indirect or consequential damages, including loss of profit, even if **ODH** knew or should have known of the possibility of such damages.
- C. Neither party is responsible to the other party for nonperformance or delay in performance of the terms of the contract due to acts of God, wars, riots, strikes, or other causes beyond the control of the parties.

**ARTICLE XV  
Assignment**

The **CONTRACTOR** shall not assign any interest (including subcontracts) in this contract and shall not transfer any interest in the same (whether by assignment or novation) without the prior written approval of **ODH**. Any such assignments or subcontracts shall be submitted for **ODH's** review 10 days prior to the desired effective date. Approval by **ODH** shall not be deemed to increase in any manner the total compensation provided for in this contract. Claims for compensation due or to become due the **CONTRACTOR** from **ODH** under this contract may be assigned to a bank, trust company, or other financial institution without **ODH's** approval if notice of any such assignment is promptly furnished in writing to **ODH**.

**ARTICLE XVI  
Drug Free Workplace**

The **CONTRACTOR** shall comply with all applicable state and federal rules, regulations and statutes pertaining to a drug free workplace. The **CONTRACTOR** shall make a good faith effort to ensure that all employees of the **CONTRACTOR** do not purchase, transfer, use or possess illegal drugs or alcohol or abuse prescription drugs in any way while working on state, county, or municipal property.

**ARTICLE XVII  
Good Standing**

- A. **CONTRACTOR** affirmatively represents and warrants to **ODH** that it is not subject to a finding for recovery under section 9.24 of the ORC, or that it has taken the appropriate remedial steps required under section 9.24 of the ORC or otherwise qualifies under that section. **CONTRACTOR** further affirmatively represents and warrants to **ODH** that it is not debarred or suspended from entering into state of Ohio contracts pursuant to section 125.25

of the ORC and is not subject to exclusion, disqualification or ineligibility as defined in 2 Code of Federal Regulations (C.F.R.) §180.110. **CONTRACTOR** agrees that if this representation and warranty is deemed false, the contract will be void *ab initio* as between the parties to this contract, and any funds paid by **ODH** hereunder shall be immediately repaid to **ODH**, or an action for recovery may be immediately commenced by **ODH** for the recovery of said funds.

- B. The **CONTRACTOR** certifies that the **CONTRACTOR** is not federally debarred from participating in government contracts funded by federal money as described in 2 C.F.R. §180.220. If at any time during the contractual period the **CONTRACTOR** is federally debarred from participating in government contracts funded by federal money, for whatever reason, the **CONTRACTOR** shall immediately notify **ODH** of the debarment.
- C. The **CONTRACTOR** certifies that all approvals, licenses or other qualifications necessary to conduct business in Ohio have been obtained and are operative. If at any time during the contractual period the **CONTRACTOR** becomes disqualified from conducting business in Ohio, for whatever reason, the **CONTRACTOR** shall immediately notify **ODH** of the disqualification.

**ARTICLE XVIII**  
**Insurance**

**CONTRACTOR** will provide the following insurance at its own expense:

- A. Workers’ Compensation insurance, as required by Ohio law or the laws of any other state where Work under this contract will be done. **CONTRACTOR** will also maintain employer’s liability insurance.
- B. Personal injury, bodily injury, and property damage liability insurance, including automobile Coverage, with personal injury and bodily injury coverage.

**ARTICLE XIX**  
**Compliance with ORC § 2909.33 (C)**

**Check One Box:**

- The **CONTRACTOR** certifies that the **CONTRACTOR** does not receive funding in the aggregate amount greater than \$100,000.00 annually from the state of Ohio, any instrumentality of the state of Ohio, and any political subdivision of the state of Ohio.

**-OR-**

- The **CONTRACTOR** certifies that the **CONTRACTOR** is currently in compliance with section 2909.33(C) of the ORC in that the **CONTRACTOR** has not and does not provide material assistance to any organization listed on the United States Department of State terrorist exclusion list or any such similar lists referenced in section 2909.33(C) of the ORC. “Material assistance” or “material support or resources” means currency, payment instruments, other financial securities, funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation, or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine

or religious materials. The **CONTRACTOR** further certifies that that the **CONTRACTOR** is not, nor has been, a member of any organization referenced above and that the **CONTRACTOR** shall notify **ODH** in any change of status regarding this certification. **CONTRACTOR** agrees that if this representation and warranty is deemed false, the contract will be void *ab initio* as between the parties to this contract and any funds paid to the **CONTRACTOR** shall be immediately repaid to **ODH** or an action for recovery may be immediately commenced by **ODH** for the recovery of said funds.

**ARTICLE XX**  
**Construction**

This agreement shall be governed, construed and enforced in accordance with the laws of the State of Ohio. Further, the Ohio courts shall have jurisdiction over the subject matter and the parties hereto in connection with disputes concerning validity and enforcement of this agreement. Should any portion of this contract be found unenforceable by operation of statute or by administrative or judicial decision, the enforceability of the balance of this contract shall not be affected thereby, provided that the absence of the unenforceable provision does not render the performance of the remainder of the contract impossible.

IN WITNESS WHEREOF, the parties, by signing below, indicate their agreement to the above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Authorized Representative, Title  
The **CONTRACTOR**' s name  
Tax or Vendor ID #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Alvin D. Jackson, M.D., Director  
Ohio Department of Health

## Request for Taxpayer Identification Number and Certification

**Give form to the  
 requester. Do not  
 send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
	List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
or
Employer identification number

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name” line.

**Limited liability company (LLC).** Check the “Limited liability company” box only and enter the appropriate code for the tax classification (“D” for disregarded entity, “C” for corporation, “P” for partnership) in the space provided.

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301.7701-3, enter the owner’s name on the “Name” line. Enter the LLC’s name on the “Business name” line.

For an LLC classified as a partnership or a corporation, enter the LLC’s name on the “Name” line and any business, trade, or DBA name on the “Business name” line.

**Other entities.** Enter your business name as shown on required federal tax documents on the “Name” line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the “Business name” line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

### Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the “Exempt payee” box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, and payments for services paid by a federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt payees, see *Exempt Payee* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

## Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

### Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.consumer.gov/idtheft](http://www.consumer.gov/idtheft) or 1-877-IDTHEFT(438-4338).

Visit the IRS website at [www.irs.gov](http://www.irs.gov) to learn more about identity theft and how to reduce your risk.

## What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Disregarded entity not owned by an individual	The owner
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



# VENDOR INFORMATION FORM

All applicable parts of the form must be completed by the vendor and returned to Ohio Shared Services signed.

## SECTION 1 – PLEASE SPECIFY TYPE OF ACTION

- NEW (W-9 OR W-8ECI FORM ATTACHED)     ADDITIONAL ADDRESS (PROVIDE COPY OF INVOICE OR LETTER)  
 CHANGE OF ADDRESS (PROVIDE ADDRESS TO BE REPLACED IN THE COMMENTS BOX ON NEXT PAGE)  
 CHANGE OF TIN (NEW W-9 AND LETTER OF EXPLANATION OF CHANGE ATTACHED)  
 CHANGE OF NAME (NEW W-9 AND LETTER OF EXPLANATION OF CHANGE ATTACHED)  
 CHANGE OF PAYTERMS     CHANGE OF CONTACT     CHANGE OF PO DISPATCH METHOD

## SECTION 2 – PLEASE PROVIDE VENDOR INFORMATION

LEGAL BUSINESS NAME: (MUST MATCH W-9 OR W-8ECI FORM)

BUSINESS NAME, TRADE NAME, DOING BUSINESS AS: (IF DIFFERENT THAN ABOVE)

TAXPAYER ID # (TIN):

BUSINESS ENTITY: NOTE: IF SOLE PROPRIETOR, THE INDIVIDUAL'S NAME MUST APPEAR IN LEGAL BUSINESS NAME

- CORPORATION                       PARTNERSHIP                       SOLE PROPRIETOR  
 NON PROFIT                               INDIVIDUAL  
 OTHER (PLEASE EXPLAIN)

INDUSTRY CLASSIFICATION:

STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODE

NORTH AMERICAN INDUSTRY CLASSIFICATION SYSTEM (NAICS) CODE

## SECTION 3 – PLEASE PROVIDE COMPLETE ADDRESS

ADDRESS:

COUNTY:

CITY:

STATE:

ZIP CODE:

**SECTION 4 – REMIT TO ADDRESS (IF DIFFERENT THAN ABOVE)**

ADDRESS:

CITY:

STATE:

ZIP CODE:

**SECTION 5 – CONTACT INFORMATION AND PERSON TO RECEIVE PURCHASE ORDER**

NAME:

WEB SITE:

PHONE:

FAX:

E-MAIL:

**SECTION 6 – IS YOUR BUSINESS CURRENTLY CERTIFIED AS? (PLEASE CHECK)**
 MBE (MINORITY BUSINESS ENTERPRISE)
  EDGE (ENCOURAGING DIVERSITY, GROWTH, & EQUITY)
  N/A
**SECTION 7 – PAYMENT TERMS (PLEASE CHECK ONE, OTHERWISE NET 30 WILL BE APPLIED BY DEFAULT)**
 2/10 NET 30
  
  NET 30
  
  NET 45
  
  NET 60
  
  NET 90
**SECTION 8 – PURCHASE ORDER DISTRIBUTION-OTHER THAN USPS MAIL (INPUT E-MAIL ADDRESS OR FAX # BELOW)**

E-MAIL:

FAX:

**SECTION 9 – PLEASE SIGN & DATE**

SIGNATURE:

DATE:

**SECTION 10 – AGENCY CONTACT INFORMATION**

AGENCY NAME:

PHONE NUMBER:

E-MAIL:

COMMENTS:

**SUBMIT FORM TO:**

**Mail:** Ohio Shared Services  
4310 E. Fifth Ave. Columbus, OH 43219

**Fax number:** (614) 485-1039

**E-mail:** [vendor@ohio.gov](mailto:vendor@ohio.gov)

**QUESTIONS? PLEASE CONTACT:**

**Phone:** 1 (877) OHIO - SS1 (1-877-644-6771)  
1 (614) 338-4781

**E-mail:** [vendor@ohio.gov](mailto:vendor@ohio.gov)