



Attachment A- AFFIDAVIT FORM

ITN CERTIFICATION FORM FLORIDA POLYTECHNIC UNIVERSITY

**ITN-21-009**

**Student Housing Feasibility Study and Student Housing Consulting & Advisory Services**

**SUBMITTAL DEADLINE: October 29, 2021, TIME: 2:00p.m. ET**

I understand that the Invitation to Negotiate (ITN) response is due no later than the due date and time as stated above, and that it is my responsibility for the response and all required documents to be received by the Florida Polytechnic University (the University) Procurement Department prior to this date and time. I certify that this proposal is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a proposal for the same materials, supplies or equipment and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this solicitation and certify that I am authorized to sign this proposal for the respondent and that the respondent is in compliance with all requirements of the ITN, including but not limited to certification requirements. In submitting a proposal to the University, the Respondent offers and agrees that if the final proposal is accepted, the Respondent will convey, sell, assign or transfer to the University all rights, title and interest in and to all causes of action it may now or hereafter acquire under the Anti- Trust Laws of the U.S. and the State of Florida for price fixing relating to the particular commodities or services purchased or acquired by the University. At the University's discretion, such assignment shall be made and become effective at the time the University tenders final payment to the Respondent. Furthermore, by responding to this solicitation, Respondent agrees that the specifications, qualifications, evaluation criteria, terms and conditions are not restrictive and attests that he/she has no objection to any of the specifications, qualifications, or evaluation criteria.

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

Printed Authorized Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Federal Employer ID #: (9 digits) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Toll Free: \_\_\_\_\_

Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is your firm a Florida Certified Minority Business? YES \_\_\_\_\_ NO \_\_\_\_\_

(If yes, please provide certificate from the State of Florida.)

**NO RESPONSE – If not responding to this solicitation, please advise reason and return via email to [bids@floridapoly.edu](mailto:bids@floridapoly.edu) with reason for NO RESPONSE:**