

Design-Build Project:

Submitter (Team) Name:

Company Name:		Year Established:	
Company Address:		Federal Tax ID:	
Company Phone:		Organization:	Corporation
Company Fax:			🗆 Joint Venture
Contact Name:			🗆 Partnership
Contact Phone:			□ Other
Contact E-mail:		State of	
		Incorporation: (if	
		applicable)	

Under penalty of perjury, I certify that:

- I am the company's Official Representative;
- The company is either prequalified to perform work as a consultant or contractor for MoDOT or is able to obtain prequalification status prior to submitting a Proposal;
- To the best of my knowledge and belief, following reasonable inquiry, the information submitted in this SOQ is true and correct.

[to be signed by authorized signatory or signatories of the Proposer and each Major Participant]

[Proposer or Major Participant's Name]

Signature

Date

Typed Name

Title



rev 1/2017

INCUMBENCY CERTIFICATE:

IN WITNESS WHEREOF, THE UNDERSIGNED HAS EXECUTED THIS INCUMBENCY CERTIFICATE:

[Proposer or Major Participant's Name]

By:

Signature

Typed or Printed Name

SECRETARY Title

Date