

ATTACHMENT NO. 12
RFP SIGNATURE PAGE FORM

(Project Name: SEAPA 2026 Cleveland Helipad Installation Project)

By submitting a proposal, respondent represents that:

(1) If respondent is a corporation, respondent will be required to provide a certified copy of the resolution evidencing authority to enter the contract if other than an officer will be signing the contract.

(2) If awarded a contract in response to this RFP, respondent will be able and willing to comply with the Insurance Requirements set out in the standard form Contract No. 25031 (RFP Attachment No. 13).

(3) If awarded a contract in response to this RFP, respondent will be able and willing to comply with all representations made by respondent in respondent's proposal and during the proposal process.

(4) Respondent agrees to fully and truthfully submit the General Information Form (RFP Attachment No. 2) and understands that failure to fully disclose requested information may result in disqualification of this proposal from consideration or termination of contract with the successful bidder, once awarded.

(5) Respondent will comply with SEAPA's restriction on communication that prohibits a person or entity seeking a SEAPA contract, or any other person acting on behalf of such a person or entity, from contacting SEAPA officials or their staff after the release date of this RFP and prior to award.

(6) Respondent is authorized to submit this proposal on behalf of the entity.

Complete the following and sign on the signature line below.
Failure to properly sign and submit this Signature Page may result in rejection of your proposal.

By its signature and in connection with its submission of a proposal to this RFP, respondent understands and agrees that SEAPA may confirm any information provided herein and may contact any reference listed herein. Respondent authorizes such persons to provide any such information to SEAPA and releases and discharges such persons and SEAPA and its agents from all claims and damages arising out of or relating to any such confirmations.

Respondent Entity Name:

(If applicable):

Co-Respondent Entity Name:

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

(Note: If proposal is submitted by co-respondents, an authorized signature from a representative of each co-respondent is required. Add additional signature blocks as required.)

Co-respondent agrees to these representations and those made in respondent's proposal. While co-respondent does not have to submit a copy of respondent's proposal, co-respondent should answer any questions or provide any information directed specifically to co-respondent.

Co-Respondent Entity Name:

Co-Respondent Signature:

Date: _____

Printed Name: _____

Title: _____