

Item Number	Proposal Submittal Checklist	Check <input type="checkbox"/>
1	Volume I – Informational Proposal: <ul style="list-style-type: none"> <input type="checkbox"/> Executive Summary <input type="checkbox"/> Organizational Structure <input type="checkbox"/> Key Personnel/ Resumes <input type="checkbox"/> Overall Experience Qualifications of Key Staff <input type="checkbox"/> Management Plan 	
2	Volume II - Office of Contract Compliance (Appendix A and Required Submittals Forms 1-9)	
3	Volume II – All Required Procurement Documents (if any of the required submittal documents are not submitted or incomplete within your Proposal submittal package, your firm may be deemed non-responsive). <u>Required Submittals include but are not limited to:</u> <ul style="list-style-type: none"> <input type="checkbox"/> Form 1; Georgia Illegal Immigration Reform and Enforcement Act (IIREA) Form <input type="checkbox"/> Form 2; Contractor Declaration and Disclosure Form <input type="checkbox"/> Form 3; Proponent Financial Disclosure & Supporting Financial Documents <input type="checkbox"/> Form 4; Acknowledgement of Insurance and Bonding Requirements <input type="checkbox"/> Form 5; Acknowledgement of Addenda <input type="checkbox"/> Form 6; Proponent Contact Directory <input type="checkbox"/> Form 7; Reference List <input type="checkbox"/> Form 8; Proposal Bond <input type="checkbox"/> Form 9; Prohibited Sources (Contractors and Vendors) Ethics Pledge <input type="checkbox"/> Submittal Checklist <input type="checkbox"/> Authority to Transact Business in the State of Georgia <input type="checkbox"/> Safety Record Form <input type="checkbox"/> Joint Venture Agreement 	
3A	Upload Cost Proposal Exhibit A.1 to ATL Cloud <input type="checkbox"/> Cost Proposal	
4	Proponent’s Official Company Name: Company Physical Address:	
5	President/Vice President/Owner Name: Title: _____ Office Telephone Number: _____ Direct Cell Telephone Number: Email Address:	
6	Primary Point-of-Contact Concerning RFP: _____ Title: _____ Office Telephone Number: _____ Direct Cell Telephone Number: _____ Email Address: _____	