



# City of Tigard

FINANCE AND INFORMATION SERVICES

## Solicitation Response Form

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ITB/RFP Number and Title: \_\_\_\_\_

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

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

\_\_\_\_\_

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

Point of Contact: \_\_\_\_\_

Is your firm certified by the State of Oregon Certification Office for Business Inclusion and Diversity?

Yes

No

If yes, check all that apply:

Disadvantaged Business Enterprise (DBE)

Service-Disabled Veteran (SVE)

Woman-owned Business Enterprise (WBE)

Emerging Small Business (ESB)

Minority-owned Business Enterprise (MBE)

I have read and thoroughly understand the disclaimer, instructions, and all other conditions related to downloading solicitation documents from the City of Tigard's web page.

I hereby attest that this information, to the best of my knowledge, is valid and correct.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Next Step: When you have completed this form, please send it to Contracts & Purchasing Office to be added to the plan holders list for this solicitation:

**Email:** [ContractsPurchasing@tigard-or.gov](mailto:ContractsPurchasing@tigard-or.gov)

**Submit:**