

ATTACHMENT 10: *CONSORTIUM BID FORM*

A Bidder shall indicate below the type of bid submitted, and complete as necessary for a Consortium bid. For additional information on Consortiums see IFB Section 2.3 Consortium Bids and 4.6 Bid Pricing Submittal (Paragraph F),

1. Indicate the type of bid submitted:

_____ **Single Vendor.** The bid has been submitted by a single vendor that has the ability to deliver the applicable Item(s) on a statewide basis to Authorized Users in all sixty-two (62) NYS counties, and the single vendor shall be the resultant Contractor.

_____ **Consortium.** The bid has been submitted by two (2) or more vendors that elect to undertake Contract performance divided by NYS County boundaries, in which the NYS County distribution results in the ability of the vendors participating in the resultant Contracts to collectively deliver the applicable Item(s) on a statewide basis to Authorized Users in all sixty-two (62) NYS counties (e.g. Consortium of two vendors: Vendor A responsible for New York, Kings, Richmond, Bronx, Queens, Nassau, and Suffolk counties; and, Vendor B responsible for all other counties in the state).

2. If the bid submitted is a Consortium bid, indicate the business information for the additional vendors participating, and the portion of all contract performance that each vendor will be responsible for, below. Please include additional sheets if necessary

Vendor Business Name: _____

Street Address: _____

City, State, Zip: _____

NYS Counties that this vendor shall be responsible for as a Contractor:

Vendor Business Name: _____

Street Address: _____

City, State, Zip: _____

NYS Counties that this vendor shall be responsible for as a Contractor:

Vendor Business Name: _____

Street Address: _____

City, State, Zip: _____

NYS Counties that this vendor shall be responsible for as a Contractor:

Vendor Business Name: _____

Street Address: _____

City, State, Zip: _____

NYS Counties that this vendor shall be responsible for as a Contractor:

By signing you certify your express authority to sign on behalf of yourself, your company, or other entity, and that all information provided is complete, true and accurate.

Legal Business Name of Company Bidding:	
D/B/A - Doing Business As (if applicable):	
Bidder's Signature:	Printed or Typed Name:
Title:	Date: