

**ATTACHMENT B**  
**Outdoor Recreation Infrastructure Planning RFP DBEA 2025.06**  
**Contractor Data Sheet**

1. Years in Business: Indicate the length of time you have been in business providing this type of service.

\_\_\_\_\_ Years \_\_\_\_\_ Months

2. References: Indicate below at least three (3) accounts for whom you have provided similar work for that has been outlined in the RFP Section 3. Include the date service was furnished, and contacts.

Client	City/State	Date	Contact name/phone
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3. Are you a subsidiary firm? \_\_\_ Yes \_\_\_ No

If yes, list parent affiliation:

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_

4. Current Number of Clients: \_\_\_\_\_

5. Number of Full-Time Employees: \_\_\_\_\_

**Authorized Signature(s)**

This form must be completed and signed by an officer of the company:

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

Contact: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

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

Date of incorporation: \_\_\_\_\_

If not a corporation, state the type of business organization, names and addresses of owners, address and phone of principle place of business, date business began, and state in which organized.

I certify the accuracy of this information.

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

Name and title (print or type): \_\_\_\_\_

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