

**COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH
STATEMENT OF QUALIFICATIONS (SOQ)
CHECKLIST – EXHIBIT 1**

ATTACHMENT

VENDOR NAME:

RFSQ, Paragraph 2.7.1, Table of Contents (Proposer’s SOQ) Yes No

RFSQ, Paragraph 2.7.2, A. Vendor’s Background and Experience (Proposer’s SOQ Section A.1)

Exhibit 1: Statement of Qualifications Checklist Yes No

Exhibit 2: Vendor’s Organization Questionnaire/Affidavit and CBE Information Yes No

Vendor furnished a copy of Certificate of Good Standing (if Corporation or LLC) Yes No

Or

Vendor furnished a copy of a statement on status of the request Yes No

Vendor furnished a copy of Statement of Information (if Corporation or LLC) Yes No

Or

Vendor furnished a copy of a statement on status of the request Yes No

Vendor furnished a copy of Certificate of Limited Partnership or Application for Registration of Foreign Limited Partnership (if Limited Partnership) Yes No

Or

Vendor furnished a copy of a statement on status of the request Yes No

RFSQ, Paragraph 2.7.2, B. Vendor’s References (Proposer’s SOQ Section A.2)

Exhibit 7: Prospective Contractor References Yes No

Exhibit 8: Prospective Contractor List of Contracts Yes No

Exhibit 9: Prospective Contractor List of Terminated Contracts Yes No

RFSQ, Paragraph 2.7.2, C. Vendor’s Pending Litigation and Judgments (Proposer’s SOQ Section A.3)

Exhibit 17: Prospective Contractor Pending Litigation and Judgments (Section A.3 of SOQ) Yes No

RFSQ, Paragraph 2.7.2, D. Vendor’s Financial Viability (Proposer’s SOQ Section A.4)

Vendor furnished copies of the company’s financial statements issued for the last three (3) years. Yes No

RFSQ, Paragraph 2.7.2, D. Vendor’s Financial Viability (Proposer’s SOQ Section A.4)

Vendor furnished copies of the company’s financial statements issued for the last three (3) years. Yes No

Vendor furnished copies of the company’s financial statements issued for the last three (3) years. Yes No

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RFSQ, Paragraph 2.7.3, REQUIRED FORMS (Proposer’s SOQ Section B)

Exhibit 3: Certification of No Conflict of Interest	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 4: Vendor’s EEO Certification	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 6: Familiarity with the County Lobbyist Ordinance Certification	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 10: Attestation of Willingness to Consider GAIN/GROW Participants	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 11: County of Los Angeles Contractor Employee Jury Service Program Certification Form and Application for Exception	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 12: Charitable Contributions Certification	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 13: Certification of Compliance with the County's Defaulted Property Tax Reduction Program	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 14: Zero Tolerance Policy on Human Trafficking Certification	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 15: Vendor’s Compliance with Encryption Requirements	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 16: Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 18: Acceptance of Terms and Conditions Affirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 19: Compliance with Fair Chance Employment Practices	<input type="checkbox"/> Yes <input type="checkbox"/> No

RFSQ, Paragraph 2.7.4, PROOF OF INSURABILITY (Proposer’s SOQ Section C)

Vendor furnished a copy of Certificate of Insurance (ACCORD or equivalent form) or a letter from a qualified insurance carrier indicating a willingness to provide the required coverage.	<input type="checkbox"/> Yes <input type="checkbox"/> No
COMMERCIAL GENERAL LIABILITY	
General Aggregate: \$2 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
Products/Completed Operations Aggregate: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
Personal and Advertising Injury: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
Each Occurrence: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
AUTO LIABILITY	
Auto Liability: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No

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WORKERS' COMPENSATION		
Each Accident: \$1 million		<input type="checkbox"/> Yes <input type="checkbox"/> No
PROFESSIONAL LIABILITY		
Not less than \$1 million per claim and \$2 million aggregate		<input type="checkbox"/> Yes <input type="checkbox"/> No
RFSQ, Paragraph 2.7.5, PROOF OF LICENSES (Proposer's SOQ Section D)		
Vendor furnished a copy of all applicable licenses, certificates, accreditation, and permits for the provision of services for which they intend to qualify which include but are not limited to: a valid Business License		<input type="checkbox"/> Yes <input type="checkbox"/> No
Vendor furnished a copy of the certificate of accreditation by the National Lead Laboratory Accrediation Program (NLLAP)		<input type="checkbox"/> Yes <input type="checkbox"/> No
RFSQ, Paragraph 2.8, SOQ Submission		
Vendor hand-delivered or sent by a delivery services the original SOQ in an enclosed in a sealed envelope or box, plainly marked in the upper left-hand corner with the name and address of the Vendor and bear the words: "SOQ FOR AS-NEEDED ENVIRONMENTAL LABORTORY TESTING SERVICES" -OR- Vendor PDF scanned the original SOQ and electronically submitted with the above subject line to: Contract and Grants Division E-mail address: Contracts-Grants@ph.lacounty.gov		<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:		
SIGNATURE		DATE
PRINT SIGNATOR'S NAME	TITLE	
ADDRESS	CITY, STATE	