ATTACHMENT 1

OFFER FORM

**OF-1**

**DEVELOPMENT OF A VACANT LAND PARCEL**

**WITHIN THE EAST KAPOLEI II PLANNED COMMUNITY**

**KAPOLEI, EWA, ISLAND OF OAHU, HAWAII**

STATE OF HAWAII

DEPARTMENT OF BUSINESS, ECONOMIC DEVELOPMENT AND TOURISM

**HAWAII HOUSING FINANCE AND DEVELOPMENT CORPORATION**

**RFP No. DEV-RFP-13-001**

Procurement Officer

Hawaii Housing Finance and

Development Corporation

677 Queen Street, Suite 300

Honolulu, Hawaii 96813

Dear Sir or Madam:

The undersigned has carefully read and understands the terms and conditions specified in this Request for Proposals, including all attachments, exhibits, and addenda, and hereby submits the following offer to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this offer, the undersigned:

* 1. is declaring his/her offer is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts;
  2. is certifying that Offeror shall comply with all applicable federal and State laws prohibiting discrimination against any person on the grounds of race, color, national origin, religion, creed, sex, age, sexual orientation, marital status, handicap, or arrest and court records in employment and any condition of employment with the Contractor or in participation in the benefits of any program or activity funded in whole or in part by the State;
  3. acknowledges and agrees that Offeror shall comply with HRS Section 11-205.5, which states that campaign contributions are prohibited from a State and county government contractor during the term of the contract if the contractor is paid with funds appropriated by a legislative body; and
  4. acknowledges and agrees that Offeror shall comply with all the requirements, provisions, terms, and conditions specified in this RFP.

Offeror is:

⬜ Sole Proprietor ⬜ Partnership ⬜ \*Corporation ⬜ Joint Venture

⬜ Other:

\*State of incorporation:

Hawaii General Excise Tax License I.D. No. Federal Tax I.D. No.

Payment address (if other than street address below):

City, State, Zip Code:

Business address (street address):

City, State, Zip Code:

Respectfully submitted:

Date: **(x)**

Authorized (Original) Signature

Telephone No.:

Fax No.: Name and Title (Please Type or Print)

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\* **Exact Legal Name of Company (Offeror)**

**\*\***If Offeror is a “dba” or a “division” of a corporation, furnish the exact legal name of the corporation under which the awarded contract will be executed: