Instructions for VENDOR PREFERENCE AFFIDAVIT OF ELIGIBILITY
For City Local, Small, or Pay Equity Preferences and/or State Resident Business and Veteran Preferences
(Goods & Services)

1. ALL INFORMATION MUST BE PROVIDED. A 5% Small Business Preference, a 5% Local Business Preference, a 5% State Resident Business Preference, a 5% Pay Equity Preference, and/or a 5% State Resident Veteran Business Preference (collectively the latter two, “State Preference”) are available for this procurement. To qualify, an Offeror MUST complete and submit this Preference Certification Form WITH ITS BID OR PROPOSAL. For a Pay Equity Preference, the City Pay Equity Business Certificate MUST be attached. For State Preference the New Mexico State certification of eligibility MUST be attached. If a Proposal is received without this Preference Certification Form and any required certifications attached, completed, signed and certified, or if this Preference Certification Form is received without the required information, the preference shall not be applied. NO FORM SHALL BE ACCEPTED AFTER THE DEADLINE FOR RECEIPT OF BIDS OR PROPOSALS.

2. PHYSICAL LOCATION MUST BE STATED. To qualify for the Small business or Local Business Preference, a business must have its principal office and place of business in the Greater Albuquerque Metropolitan Area. The business location identified on the Preference Certification Form must be a physical location, street address or such. DO NOT use a post office box or other postal address.

3. PREFERENCE CERTIFICATION FORM MUST BE COMPLETED BY PRINCIPAL OFFEROR. This Preference Certification Form must be completed for the Principal Offeror, or one of the Principal Offerors if the Offeror is a joint venture or partnership, or by an individual authorized to sign for the Offeror. Subcontractors of the Offeror shall not be used to qualify a Proposal for a preference and should not complete or submit the Form.

4. APPLICATION OF PREFERENCES. The State Resident Business Preference or State Resident Veteran Business Preference shall be applied to any Proposals submitted that include a valid, State of New Mexico-issued, Resident Business or Resident Veteran Business Certification Number. The Small Business Preference, and the Local Business Preference shall be applied to all Proposals submitted by eligible small businesses. The local preference only will be applied to all Proposals submitted by eligible local businesses which are not small businesses. The Pay Equity Preference shall be applied to all Proposals submitted that include a City Pay Equity Business Certificate. The total percentage of all preferences awarded shall not exceed ten percent (10%).

5. DEFINITIONS. The following definitions apply:
   - The Greater Albuquerque Metropolitan Area includes all locations within the City of Albuquerque and Bernalillo County.
   - A Local Business is a business that is headquartered in and maintains its principal office and Place of Business in the Greater Albuquerque Metropolitan Area.
   - A Place of Business is a business’ location in the Greater Albuquerque Metropolitan Areas that is staffed and open to the public on a regular basis.
   - A Small Business is a Local Business that employs an average of fewer than fifty (50) full-time employees in a calendar year. The calendar year immediately prior to the request for the preference should be used.
   - A full-time employee is an employee of the business who is hired to work at least forty (40) hours per week, whether in a permanent, temporary or seasonal status. If all full-time employees of the business are hired to work a shorter work week, the Chief Procurement Officer may reduce this requirement, upon receipt of adequate documentation.
   - Pay Equity Preference shall be applicable as provided in City Ordinance 5-5-31 (as amended by C/S O-17-33).
   - State Resident Business and State Resident Veteran Business shall be applicable as provided in 13-1-21 NMSA 1978.

6. ADDITIONAL DOCUMENTATION. If requested, a business shall provide, within three (3) working days of receipt of the request, documentation to substantiate the information provided on the Preference Certification Form. The Chief Procurement Officer shall determine the sufficiency of such documentation.

7. NO PREFERENCES SHALL BE APPLIED IF FEDERAL FUNDS ARE USED.
VENDOR PREFERENCE
AFFIDAVIT OF ELIGIBILITY

City of Albuquerque
Purchasing Division

One Civic Plaza – 7th Floor
P.O. Box 1293 Room 7012
Albuquerque, NM 87103
Phone: (505) 768-3320
Fax: (505) 768-3355

<table>
<thead>
<tr>
<th>Preference Type: (Check applicable preference/s)</th>
<th>Local-City Business</th>
<th>Small Business</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Resident Business Preference</td>
<td>State Resident Veteran Business Preference</td>
<td>Pay Equity Preference</td>
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</tbody>
</table>

Legal Name of Firm:

Contact Person: Telephone:

E-mail Address: Fax:

Mailing Address: Physical Address (if Different):

Number of full-time employees working in the city of Albuquerque: Attach 941 Tax Form

Check all that apply:

- **I certify my company meets the following qualifications to be eligible for Local Business Preference:**
  1. Is headquartered in and maintains its principal office and place of business in the Greater Albuquerque Metropolitan Area. Attach 941 Tax Form.
  2. Such location is staffed with full-time employees.
  3. Such location is open to the public on a regular basis.
  4. Is operating or performing its business from this location.
  5. Note: A post office box shall not be considered a physical business address.

- **I certify my company meets the following qualifications to be eligible for Small Business Preference:**
  1. Meets the requirements for a Local Business Preference (see above). Attach 941 Tax Form.
  2. Employs fewer than fifty (50) full-time employees in a calendar year.

- **I certify that I am attaching the Pay Equity Business Certificate.** NOTE: The Pay Equity Form required in Section 1.24 of this RFP is not a Pay Equity Business Certificate, nor does it qualify you for the Pay Equity Preference. To obtain a certificate, please contact the Women’s Pay Equity Task Force by telephone: (505) 768-3512 or email: oei@cabq.gov.

- **I certify that I am attaching the New Mexico State certification of Resident Business.**

- **I certify that I am attaching the New Mexico State certification Resident Veteran’s Business preference.**

- **I certify that under the penalty of perjury, the foregoing statements are true and correct. I also acknowledge that any person, firm, corporation or entity intentionally submitting false information to the City in an attempt to qualify for a preference shall be prohibited from bidding or proposing on City goods and/or services for a period of up to three (3) years.**

Authorized Signature: _____________________________ Date: _____________________________

Printed Name: _____________________________ Title: _____________________________

ACKNOWLEDGMENT

State of New Mexico
County of _____________

Signed and sworn to before me on __________ by _____________________________.

______________________________________________ Notary

My Commission expires on ___________________