CONFLICT OF INTEREST FORM

RFP NO./CONTRACT NO.		DATE SUBMITTED	
PROJECT TITLE			
NAME OF FIRM			
NAME OF PREPARER			

SECTION I: INSTRUCTIONS

All Consultants seeking a contract, purchase order, or task order of $25,000 or more must complete and submit this form. This form must also be submitted for any proposed subconsultant(s).

Before completing this Form, please review SCAG's Consultant Conflict of Interest Policy, the list of SCAG employees, and the list of SCAG Officials. This information can be viewed online at scag.ca.gov. Terms used in this Form have the same meaning as the Policy.

A "Yes" answer does not automatically disqualify a Consultant. SCAG will review the disclosure and determine whether the conflict can be avoided or mitigated. Failure to complete this form, failure to disclose required information, or submission of false, incomplete, or misleading information may result in rejection of a proposal, disqualification from a procurement, termination of a contract, withholding of payment, or any other remedy available to SCAG.

Questions regarding this form should be directed to SCAG's Legal Division; however, SCAG's Legal Division represents SCAG and cannot provide legal advice to Consultants or other outside parties.

SECTION II: QUESTIONS

1. During the last 12 months, has the Consultant or any of its principals, officers, partners, or key personnel provided a source of income, compensation, payment, gift, loan, reimbursement, promise of future work, or other financial benefit to any SCAG Official or SCAG employee?
   Yes ☐ No ☐

   If "yes," please list the names of those SCAG Officials and/or SCAG employees and the nature of the financial interest:

Name	Nature of Financial Interest

2. Does any SCAG Official or SCAG employee hold a position or have an ownership interest, investment interest, partnership interest, or other financial or business interest in the Consultant?
   Yes ☐ No ☐

   If "yes," please list the names of those SCAG Officials and/or SCAG employees and describe the position or interest:

Name	Position of Interest

SECTION II: QUESTIONS *(continued)*

3. Within the last 12 months, has the Consultant or any of its principals, officers, partners, or key personnel been employed by SCAG or served as a SCAG Official?
   Yes ☐ No ☐

   If "yes," please list the names of those individuals and the positions held:

Name	Prior SCAG Position

4. Is the Consultant or any of its principals, officers, partners, or key personnel immediate family or have a close personal relationship to any SCAG Official, SCAG employee, evaluation committee member, or other person involved in the procurement, award, or payment of the proposed SCAG work?
   Yes ☐ No ☐

   If "yes," please list the names of those individuals and describe the relationship:

Name	Relationship

5. During the last 12 months, has the Consultant or its agent made a contribution to a SCAG Official's campaign or controlled committee of more than $500 in the aggregate? (Include contributions made by any individual who directs or controls your entity's contributions, and contributions made by any entity owned by the same majority owners as your entity. An "agent" is a person who is compensated by your entity, as an employee or independent contractor, and who has communicated or will communicate with SCAG to influence SCAG's decisions on the proposed proceeding.)
   Yes ☐ No ☐

   If "yes," please list the names of those SCAG Officials who received contributions, the name of the contributor, the date(s) of the contribution, and the amount of each contribution that aggregates to $500 or more:

Name	Contributor	Dates	Amount(s)

6. Has the Consultant or any of its principals, officers, partners, or key personnel performed prior work for SCAG, assisted with the development of this procurement, or received confidential information that could provide an unfair competitive advantage in connection with the proposed SCAG work?
   Yes ☐ No ☐

   If "yes," please explain:

SECTION II: QUESTIONS *(continued)*

7. Does the Consultant or any of its principals, officers, partners, or key personnel have any organizational conflict of interest that may impair the Consultant's objectivity, judgment, independence, or ability to perform work in SCAG's best interests? (Examples may include evaluating or overseeing the Consultant's own work, representing another client whose interests are materially adverse to SCAG, performing work for another entity that may conflict with SCAG responsibilities, or having divided contractual duties.)
   Yes ☐ No ☐

   If "yes," please explain:

SECTION III: CONTINUING DUTY TO DISCLOSE

A Consultant must update this form promptly if circumstances change, if additional facts become known, or if the Consultant seeks additional work that may create a new or different actual, potential, or perceived conflict of interest.

☐ I acknowledge the continuing duty to disclose actual, potential, or perceived conflicts of interest.

SECTION III: VALIDATION STATEMENT

This Validation Statement must be completed and signed by at least one General Partner, Owner, Principal, or Officer authorized to legally commit the Consultant.

DECLARATION

I, (printed full name) _____, hereby declare that I am the (position or title) _____ of (Consultant name) _____, and that I am duly authorized to execute this Validation Statement on behalf of the Consultant. I declare that I have reviewed SCAG's Consultant Conflict of Interest Policy, made reasonable inquiry as required, and the information provided in this form is true, correct, complete, and current as of the date submitted.

I acknowledge that any false, deceptive, incomplete, or misleading statement or omission may result in rejection of the proposal, disqualification from the procurement, termination of any resulting or existing contract, withholding of payment to the extent permitted by law or contract, or any other remedy available to SCAG.

SIGNATURE _____ DATE _____

PRINTED NAME _____

TITLE _____

FIRM _____