

Attachment - Organizational Conflict of Interest Statement 36C25718Q0189

852.209-70.ORGANIZATIONAL CONFLICTS OF INTEREST (JAN 2008)

- (a) It is in the best interest of the Government to avoid situations which might create an organizational conflict of interest or where the offeror's performance of work under the contract may provide the contractor with an unfair competitive advantage. The term "organizational conflict of interest" means that because of other activities or relationships with other persons, a person is unable to render impartial assistance or advice to the Government, or the person's objectivity in performing the contract work is or might be otherwise impaired, or the person has an unfair competitive advantage.
- (b) The offeror shall provide a statement with its offer which describes, in a concise manner, all relevant facts concerning any past, present, or currently planned interest (financial, contractual, organizational, or otherwise) or actual or potential organizational conflicts of interest relating to the services to be provided under this solicitation. The offeror shall also provide statements with its offer containing the same information for any consultants and subcontractors identified in its proposal and which will provide services under the solicitation. The offeror may also provide relevant facts that show how its organizational and/or management system or other actions would avoid or mitigate any actual or potential organizational conflicts of interest.
- (c) Based on this information and any other information solicited or obtained by the contracting officer, the contracting officer may determine that an organizational conflict of interest exists which would warrant disqualifying the contractor for award of the contract unless the organizational conflict of interest can be mitigated to the contracting officer's satisfaction by negotiating terms and conditions of the contract to that effect. If the conflict of interest cannot be mitigated and if the contracting officer finds that it is in the best interest of the United States to award the contract, the contracting officer shall request a waiver in accordance with FAR 9.503 and 48 CFR 809.503.
- (d) Nondisclosure or misrepresentation of actual or potential organizational conflicts of interest at the time of the offer, or arising as a result of a modification to the contract, may result in the termination of the contract at no expense to the Government.

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APPENDIX A

[CONTRACTOR NAME:_____]

[ADDRESS]:

SOLICITATION: 36C25718Q0189

CONTRACTOR CONFLICT OF INTEREST CERTIFICATION STATEMENT

Attachment Contractor Employee Legal Status (36C25718Q0189)

CONTRACTOR CERTIFICATION: IMMIGRATION AND NATIONALITY ACT OF 1952, AS AMENDED

The Contractor certifies that the Contractor shall comply with any and all legal provisions contained in the Immigration and Nationality Act of 1952, As Amended; its related laws and regulations that are enforced by Homeland Security, Immigration and Customs Enforcement and the U.S Department of Labor as these may relate to non-immigrant foreign nationals working under contract or subcontract for the Contractor while providing services to Department of Veterans Affairs patient referrals;

While performing services for the Department of Veterans Affairs, the Contractor shall not knowingly employ, contract or subcontract with an illegal alien; foreign national non-immigrant who is in violation their status, as a result of their failure to maintain or comply with the terms and conditions of their admission into the United States. Additionally, the Contractor is required to comply with all "E-Verify" requirements consistent with "Executive Order 12989" and any related pertinent Amendments, as well as applicable Federal Acquisition Regulations.

If the Contractor fails to comply with any requirements outlined in the preceding paragraphs or its Agency regulations, the Department of Veterans Affairs may, at its discretion, require that the foreign national who failed to maintain their legal status in the United States or otherwise failed to comply with the requirements of the laws administered by Homeland Security, Immigration and Customs Enforcement and the U.S Department of Labor, shall be prohibited from working at the Contractor's place of business that services Department of Veterans Affairs patient referrals; or other place where the Contractor provides services to veterans who have been referred by the Department of Veterans Affairs; and shall form the basis for termination of this contract for breach.

The Contractor agrees to obtain a similar certification from its subcontractors.

Signature: _____

Date: _____

Typed Name and Title: _____

Company Name: _____

This certification concerns a matter within the jurisdiction of an agency of the United States and the making of a false, fictitious, or fraudulent certification may render the maker subject to prosecution under 18 U.S.C. 1001.

[] _____ [CONTRACTOR NAME] _____ represents that the individuals listed in the Key

Personnel and Temporary Emergency Substitutions section of the solicitation [36C25718Q0189] in have no present, or currently planned interest (financial, contractual, organizational, or otherwise) or actual or organizational conflicts of interest relating to the services to be provided to all locations under the referenced solicitation.

None of the employees listed in the solicitation have a past interest (financial, contractual, organizational, or otherwise) or actual or organizational conflicts of interest relating to the services to be provided to all locations listed under the referenced solicitation.

OR

[] Statement attached describing, in a concise manner, all relevant facts concerning any past, present, or currently planned interest (financial, contractual, organizational, or otherwise) or actual or potential organizational conflicts of interest relating to the services to be provided under this solicitation. The offeror shall also provide statements with its offer containing the same information for any consultants and subcontractors identified in its proposal and which will provide services under the solicitation. The offeror may also provide relevant facts that show how its organizational and/or management system or other actions would avoid or mitigate any actual or potential organizational conflicts of interest.

NAME OF CERTIFYING OFFICIAL
TITLE

SIGNATURE

DATE



VA FACILITY INFORMATION		PAYEE/VENDOR INFORMATION	
STATION NUMBER 674		DATE	
STATION CONTACT Hassan Wilson, Contract Specialist		COMMERCIAL VENDOR REGISTERED IN SAM.GOV <small>(Required IAW FAR 4.1102)</small>	
STATION PHONE NUMBER STATION FAX NUMBER (915) 217-1241 (915) 217-1261		DUNS NUMBER	
STATION EMAIL ADDRESS hassan.wilson@va.gov		DUNS+4	
PAYEE/VENDOR TYPE <small>(Select one)</small>		SSN/TIN	
<input checked="" type="checkbox"/> C - COMMERCIAL <input type="checkbox"/> F - FEDERAL AGENCY		NPI	
<input type="checkbox"/> E - EMPLOYEE <input type="checkbox"/> O - FOREIGN FACTS ID		<input type="checkbox"/> SMALL BUSINESS - VENDOR MUST BE QUALIFIED AS SMALL BUSINESS IN SAM OR FURNISH SBA CONFIRMATION	
<input type="checkbox"/> I - INDIVIDUAL/HONORARIUM <input type="checkbox"/> A - AGENT CASHIER		VENDOR NAME	
<input type="checkbox"/> V - VETERAN <input type="checkbox"/> U - UTILITY		DBA	
MISCELLANEOUS ACTIONS <small>(Select one)</small>		CONTACT	
<input type="checkbox"/> WINRS <input type="checkbox"/> ASSIGNMENT <small>(All applicable documents)</small>		EMAIL ADDRESS	
<input type="checkbox"/> BILL OF COLLECTIONS <input type="checkbox"/> SETTLEMENT/TORTS		PHONE NUMBER	
<input type="checkbox"/> ALAC/LGY ACCOUNT #		CURRENT ADDRESS <small>(Include Street, City, State and Zip Code)</small>	
		PREVIOUS ADDRESS <small>(Include Street, City, State and Zip Code)</small>	
		EFT/ACH <small>(Required IAW 31 CFR Part 208)</small>	
		BANK NAME	
		BANK ADDRESS <small>(Include City, State and Zip Code)</small>	
		NINE-DIGIT BANK ROUTING NUMBER	
		ACCOUNT NUMBER	
		ACCOUNT TYPE	
		<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	
		PAYEE/VENDOR PRINTED NAME & TITLE	
		SIGNATURE	

FOR QUESTIONS REGARDING THIS FORM:
NVF CONTACT INFORMATION:

NATIONWIDE VENDOR FILE CUSTOMER SERVICE:
EMAIL: VAFSCVENDOT@VA.GOV

FOR ALL OTHER INQUIRIES:

CUSTOMER CARE CENTER: 1-877-353-9791
STATION CARE CENTER: 1-866-372-1141

SUBMIT ALL DOCUMENTATION VIA:
SECURE FAX: 512-460-5221

NORMAL PROCESSING TIME IS 3 - 5 BUSINESS DAYS. WE DO NOT ACCEPT INVOICES