



IBE UNAVAILABILITY CERTIFICATION – GOOD FAITH EFFORT

Contract Number: _____ Project Title: _____

Name: _____ Title: _____

of: _____
(Prime Consultant)

Certifies that, on _____ he/she contacted the below named IBE to obtain a
(Date)

Bid/Proposal for work items to be performed on the above named Project.

IBE:					
Phone:	()	Fax:	()	Email:	

Type of Work Requested to be performed:

To the best of my knowledge and belief, said IBE was unavailable for work on this project, *exclusive of unavailability due to lack of agreement on price*, and was unable to prepare a proposal for the following reason(s):

Signature of Prime Consultant

Date

The above statement is a true and accurate account of why I did not submit a proposal on this project.
(Below is to be signed by **IBE firm ONLY**.)

Signature of IBE Firm

Name of IBE Firm

Print Name

Address

Print Title

Date