

Evidence of Subcontractor/Subrecipient Responsibility Statement

1. Authorized Negotiators

Laterite proposal for REACH Evaluation may be discussed with any of the following individuals. These individuals are authorized to represent Laterite in negotiation of this offer.

[Insert list of individuals]

These individuals can be reached at:

Address: [Insert Information]

Tel: [Insert Information]

Email: [Insert Information]

2. Adequate Financial Resources

Laterite has adequate financial resources to manage this subcontract, as established by our audited financial statements submitted in this proposal.

3. Ability to Comply

Laterite is able to comply with the proposed delivery of performance schedule having taken into consideration all existing business commitments, commercial as well as governmental.

4. Record of Performance, Integrity, and Business Ethics

Laterite has been in business for four years. Has a satisfactory performance record (See FAR 9.104-3(b) and Subpart 42.15) to perform the services required under the award and has a satisfactory record of integrity and business ethics.

5. Organization, Experience, Accounting and Operational Controls, and Technical Skills

Laterite has the necessary organization, experience, accounting and operational controls, and technical skills, including accounting systems, internal control procedures, property control systems, quality assurance measures, and written policies of Administrative, Operational and Human Resources and safety programs applicable to services to be performed (FAR 9.104-3(a)).

6. Equipment and Facilities

Laterite has the necessary systems, equipment and facilities (FAR 9.104-3(a)) to perform services required under contract.

7. Eligibility to Receive Award

Laterite is qualified and eligible to receive an award under applicable laws and regulations and if they have performed work of similar nature under similar mechanisms for USAID, any other federal agency, and/or international donor. Laterite DUNS number is [Insert Information].

8. Cognizant Government Audit Agency

Laterite auditor is [Insert Name], [Insert Address]

9. Recovery of Vacation, Holiday and Sick Pay

Laterite will comply with any rule regarding vacation, holiday or/and sick pay.

Date: [Insert Date]

Name: [Insert Name]

Title: [Insert Title]

Authorized Signature: [Sign]