Form 1A
Required Participation Questionnaire
TWO APPARENT LOW BIDDERS SHOULD SUBMIT WITHIN 10 BUSINESS DAYS OF BID OPENING DATE AND TIME

INSTRUCTIONS: A fully completed Form 1A "Required Participation Questionnaire" must be submitted for the prime firm, each subcontractor, and any other tier or subcontractor, as a condition of responsiveness. This information is to be collected and documented for all City of Baton Rouge and Parish of East Baton Rouge. All items requested on the form are required, if an item is not applicable, respondents shall enter N/A. Each prime firm participating as a joint venture shall complete a separate form and indicate (Item 9) that the response is a joint venture.

1. Project name, project number and date of submittal: **Indian Mound Fire & EMS Station** **21-ASC-CP-1608**	2. Official name of firm: **Dammon Engineering, Inc** Indicate if prime or subcontractor	3. Address of office to perform work: **554 Old Spanish Trail, Slidell, LA 70458**
4. Name of parent company, if any: **Dammon Engineering, Inc**	5. Location of headquarters (city): **Slidell**	6. Age of firm:
7. Name, title, and telephone number of principal contact: Chuck Dammon, Member **(985) 649-5832**	8. Indicate Any Special Status: □ small business □SBA certified □Women-owned business □LAUCP DBE certified □ Minority-owned business □SEDB certified with CITY-PARISH *A firm participating as a SEDB must be certified by the City of Baton Rouge and Parish of East Baton Rouge SEDBE Program by the date of submittal. Current letter of certification shall be attached.	
9. Is this submittal a joint venture (JV)? □ Yes ☒ No	10. Summary of firm's annual revenues (please insert index number from below): Last Year:_____ 2 Years ago:_____ 3 Years ago:_____	
If so, has the JV worked together before? □ Yes □ No	Ranges of annual revenues received: Index: 1. less than $500,000 2. $500,000-$1,000,000 3. $1,000,000 - $2,000,000 4. $2,000,000-$4,000,000 5. $5,000,000-$6,000,000 6. $6,000,000 or greater	

I do solemnly declare and affirm under the penalties of perjury that the contents of this document are true and correct, and that I am authorized on behalf of this firm to make this affidavit.

Signature:_____ Date:_____

Printed Name:_____ Title:_____