

ATTACHMENT L2
FINANCIAL RESPONSIBILITY QUESTIONNAIRE
Request for Proposal: FA2823-22-R-0010
Renovate Building 600

FTFA 12-1069

INSTITUTION: _____

ADDRESS: _____

SUBJECT: Financial Responsibility Questionnaire for _____

1. How long have you been doing business with _____
(Contractor's Name)

2. Do they have any loans outstanding with your institution? If so, have they ever had any payment problems?

3. Do they have a line of credit with your institution? If so, what is the pre-approved balance?

4. What is the average revolving monthly balance in checking or savings account with your institution? This does not have to be exact, but we would like to know if it is in the 3, 4, 5, 6, etc. figure range.

5. Would you continue to do business with _____?
_____ in the future? (Contractor's Name)

6. The above inquiries provide basic financial responsibility insight, but if you would like to add any further information that would help us determine positive / negative standing, please feel free to comment.

Completed By: _____ Position: _____

Date: _____ E-mail or Telephone: _____

Signature: _____