Request for Qualifications

Potential Responsible Party Investigation and Evaluation

New Jersey Division of Law

Appendix A: Conflict of Interest Form

I am an officer of the firm listed below and am completing this certification on its behalf. I have examined the list of persons and/or entities itemized below:

List of Potentially Responsible Parties (PRP's):

Pursuant to the Conflict of Interest section of the RFQ, I hereby affirm that the firm has:

A. □ Had no contractual or other business relationships with any of these persons or entities.
   □ Had relationships with the persons or entities as listed and described on a separate sheet attached to this form.

B. □ Done no work on or with respect to the site.
   □ Done work on or with respect to the site as listed and described on a separate sheet attached to this form.

Name of Firm Submitting this Form: ____________________________________________________

Signature: __________________________________________________________________________

Type or Print Name: __________________________________________________________________

Date: ______________________________________________________________________________