
EXHIBIT R

LIABILITY QUESTIONNAIRE

**VIRGIN ISLANDS HOUSING AUTHORITY
LIABILITY QUESTIONNAIRE**

BUSINESS NAME: _____

Each officer or principal is required to submit this Questionnaire with your response. This form shall be filled out in its entirety and notarized. Failure to submit this form may cause your response to be deemed non-responsive.

(1) Has your company, any partner or officer of your company ever been sued? YES NO
If yes, please explain. _____

(2) Is your company, any partner or officer of your company currently involved in pending litigation? YES NO
If yes, please explain. _____

(3) Has your company, any partner or officer of your company ever been involved in litigation against the Virgin Islands Housing Authority of the US Department of Housing & Urban Development? YES NO
If yes, please explain. _____

(4) Has a bonding company ever denied, paid out claims or revoked a bond your company or any officers or partners of your company? YES NO
If yes, please explain. _____

(5) Are you a subject to any actions that could result in a "yes" answer to any of the above questions? YES NO
If yes, please explain. _____

Company Officer or Partner (Printed Name)

Signature

Title

Subscribed and sworn to

before me this _____ day
of _____, 20____

My commission expires

Notary

Date

WARNING

All information is to be true and accurate. False, misleading statements or failure to provide information will disqualify Vendor or Contractor from VIHA 's procurement process. VIHA reserved the right, based on the information provided, to determine if a conflict of interest is real or apparent and whether or not a Vendor or Contractor is qualified to be participating in the procurement process.