Attachment B

HARBOR REGIONAL CENTER
RFP FY2021-22
STATEMENT OF OBLIGATION
(Please attach additional pages if needed)

1. The applicant is presently providing services to individuals with intellectual and developmental disabilities:

   ☐ No ☐ Yes

   If **Yes**, indicate name, location, type and capacity of service(s):

2. The applicant is presently providing services to individuals other than those with intellectual and developmental disabilities:

   ☐ No ☐ Yes

   If **Yes**, indicate name, location, type and capacity of service(s):

3. Is the applicant currently receiving grant/funds from any source to develop services for individuals with intellectual and developmental disabilities?

   ☐ No ☐ Yes

   If **Yes**, indicate funding source and scope of grant project.

4. Is the applicant currently applying for grant/funds from any source to develop services for Fiscal Year 2021/22?

   ☐ No ☐ Yes

   If **Yes**, indicate funding source and scope of grant project.

5. The applicant is planning to expand existing services (through a Letter of Intent and with or without grant funds) from a source other than Harbor Regional Center during Fiscal Year 2021/22:

   ☐ No ☐ Yes

   If **Yes**, please provide details.

6. Describe other professional/business obligations. Include name, location, type, and capacity of service/obligation. Do not include services you expect to provide through this grant.

7. Has the applicant or any member of the applicant's organization received a citation from a regional center or State Licensing agency within the last 2 years?

   ☐ No ☐ Yes

   If **Yes**, explain in detail.

8. Has the applicant or a member of the applicant's organization or staff ever received a citation from any agency for abuse?

   ☐ No ☐ Yes

   If **Yes**, explain in detail.