EQUAL BENEFITS ORDINANCE DISCLOSURE FORM

As a condition of being awarded a contract with the City of Long Beach ("City"), the selected Contractor/Vendor ("Contractor") may be required during the performance of the Contract, to comply with the City's nondiscrimination provisions of the Equal Benefits Ordinance ("EBO") set forth in the Long Beach Municipal Code section 2.73 et seq. The EBO requires that during the performance f the contract, the Contractor shall provide equal benefits to its employees with spouses and employees with domestic partners. Benefits include but are not limited to, health benefits, bereavement leave, family medical leave, member ship and membership discounts, moving expenses, retirement benefits and travel benefits. A cash equivalent payment is permitted if an employer has made all reasonable efforts to provide domestic partners with access to benefits but is unable to do so. A situation in which a cash equivalent payment might be used if where the employer has difficulty finding an insurance provider that is willing to provide domestic partner benefits.

The EBO is applicable to the following employers:

- For-profit employers that have a contract with the City for the purchase of goods, services, public works or improvements and other construction projects in the amount of \$100,000 or more
- For-profit entities that generate \$350,000 or more in annual gross receipts leasing City property pursuant to a written agreement for a term exceeding 29 days in any calendar year

Contractors who are subject to the EBO must certify to the City before execution of the contract that they are in compliance with the EBO by completing the EBO Certification Form, attached, or that they have been issued a waiver by the City. Contractors must also allow authorized City representatives access to records so the City can verify compliance with the EBO.

The EBO includes provisions that address difficulties associated with implementing procedures to comply with the EBO. Contractors can delay implementation of procedures to comply with the EBO in the following circumstances:

- 1) By the first effective date after the first open enrollment process following the contract start date, not to exceed two years, if the Contractor/vendor submits evidence of taking reasonable measures to comply with the EBO; or
- 2) At such time that the administrative steps can be taken to incorporate nondiscrimination in benefits in the Contractor/vendor's infrastructure, not to exceed three months; or
- 3) Upon expiration of the contractor's current collective bargaining agreement(s).

Compliance with the EBO

If a contractor has not received a waiver from complying with the EBO and the timeframe within which it can delay implementation has expired but it has failed to comply with the EBO,

the Contractor may be deemed to be in material breach of the Contract. In the event of a material breach, the City may cancel, terminate or suspend the City agreement, in whole or in part. The City also may deem the Contractor an irresponsible bidder and disqualify the Contractor from contracting with the City for a period of three years. In addition, the City may assess liquidated damages against the Contractor which may be deducted from money otherwise due the Contractor. The City may also pursue any other remedies available at law or in equity.

By my signature below, I acknowledge that the Contractor understands that to the extent it is subject to the provisions of the Long Beach Municipal Code section 2.73, the Contractor shall comply with this provision.

Printed Name:	Title:
Signature:	Date:
Business Entity Name:	

CERTIFICATION OF COMPLIANCE WITH THE EQUAL BENEFITS ORDINANCE

Section 1. CONTRACTOR/VENDOR INFORMATION

Name:		Federal Tax ID No	
Address:			
City:		State: ZIP:	
Contact I	Person:	Telephone:	
Email:	-	Fax:	
Section 2	. COMPLIANCE QUESTIONS		
A.	employeesYesNo	Contract because the Contractor/Vendor has no	
B.	Does your company provide (or employee benefits?Yes _	make available at the employees' expense) any	
	(If "yes," proceed to Question C. apply to you.)	If "no," proceed to section 5, as the EBO does not	
C.	Does your company provide (or make available at the employees' expense) any benefits to the spouse of an employee?		
D.	YesNo Does your company provide (or make available at the employees' expense) benefits to the domestic partner of an employee?		
	YesNo (if you ans section 5, as the EBO is not app	swered "no" to both questions C and D, proceed to blicable to this contract. If you answered "yes" to continue to Question E. If you answered "yes" to	
E.**	Are the benefits that are availab	le to the spouse of an employee identical to the e domestic partner of an employee?Yes	
		as you are in compliance with the EBO. If "no,"	
Section 3	. PROVISIONAL COMPLIANCE		
A.	Contractor/vendor is not in comp following date:	pliance with the EBO now but will comply by the	
	contract start date, not to exce	after the first open enrollment process following the ed two years, if the Contractor/vendor submits asures to comply with the EBO; or	
		administrative steps can be taken to incorporate e Contractor/vendor's infrastructure, not to exceed	

	agreement(s).	of the contractor's current collective pargaining
B.	do so, do you agree to pro	ble measures to comply with the EBO but are unable to vide employees with a cash equivalent? (The cash noney your company pays for spousal benefits that are ners.)
Section 4	. REQUIRED DOCUMENTAT	<u>FION</u>
provide d	locumentation (copy of emplo	or contract award, you may be required by the City to byee handbook, eligibility statement from your plans, verify that you do not discriminate in the provision of
Section 5	. <u>CERTIFICATION</u>	
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that I am authorized to bind this entity contractually. By signing this certification, I further agree to comply with all additional obligations of the Equal Benefits Ordinance that are set forth in the Long Beach Municipal Code and in the terms of the contract of purchase order with the City.		
Executed	this day of	_, 20, at,
Name	 -	Signature
Title		Federal Tax ID No