

ORGANIZATION CERTIFICATION

City of New York Department of Cultural Affairs
Fiscal 2017 Public Service Award

Organization Name:	
Address:	
Telephone No.:	ext:
Taxpayer Identification No.:	

1. For the past five years, unless otherwise exempt, the organization has filed all required tax returns and paid all applicable federal, state or New York City taxes.
2. In the past five years, no judgment, injunction or lien has been issued against the organization based on taxes owed to, or fines or penalties assessed by, any governmental agency or elected official and there is currently no outstanding tax warrant or unsatisfied tax lien against the organization as reflected in the records of the City.
3. In the past seven years, no bankruptcy proceedings, either voluntary or involuntary, have been initiated by or against the organization.
4. The organization has not been convicted, after trial or a plea, (a) of any misdemeanor during the past five years, or (b) of any felony during the last ten years.
5. In the past five years, the organization has not been put on notice that it was being investigated by any federal, state or local prosecuting or investigative agency including, but not limited to, federal, state and local regulatory agencies.
6. Within the past three years, the organization has not petitioned a court to transfer or sell all or substantially all of its assets.
7. During the past five years, the organization has not had any permit, license, concession, franchise or lease terminated for cause by any government agency; nor has the organization been declared in default on a contract, nor has it been debarred from obtaining contracts, by any government agency.
8. During the past five years, the organization has not been found to be not responsible by any government agency.
9. The names of the organization's chief executive officer and chief financial officer are as follow:
Chief Executive Officer:
Chief Financial Officer:

Should your organization engage either a new chief executive officer or a new chief financial officer during the course of Fiscal 2017, please notify DCA immediately and have the new officer complete and return the Individual Certification to be provided by DCA.

Note: If any of the above statements are not true, please specify the relevant statement and provide an explanation on a separate sheet.

Statement Nos. _____ are not true.

The undersigned certifies that he or she is an authorized signatory of the applicant organization and that, to the best of his or her knowledge, the statements listed in this certification are true, except as indicated above. A materially false statement made in submitting this certification may result in the organization's Fiscal 2017 Public Service Award being withdrawn, and, in addition, may subject the organization and/or the person making the false statement to criminal charges under the New York State Penal Law.

Signature

Title

Date