
AFFIRMATION

The undersigned applicant affirms and declares that said applicant is not in arrears to the City of New York upon debt, contract or taxes and is not a defaulter, as surety or otherwise, upon obligation to the City of New York, and has not been declared not responsible, or disqualified, by any agency of the City of New York, nor is there any proceeding pending relating to the responsibility or qualification of the applicant to receive public contract except

_____.

Full name of Applicant [below]

Address _____

City _____ State _____ Zip Code _____

CHECK ONE BOX AND INCLUDE APPROPRIATE NUMBER:

A – Individual or Sole Proprietorships

SOCIAL SECURITY NUMBER _____

B -- Partnership, Joint Venture or other unincorporated organization

EMPLOYER IDENTIFICATION NUMBER _____

C -- CORPORATION

EMPLOYER IDENTIFICATION NUMBER _____

By _____

Signature

Title

If a corporation place seal here

Must be a signed officer or duly authorized representative.

* Under the Federal Privacy Act, the furnishing of Social Security Numbers by applicants on City contracts is voluntary. Failure to provide a Social Security number will not result in a applicant's disqualification. Social Security numbers will be used to identify vendors to ensure compliance with laws, to assist the City in enforcement of laws, as well as to provide the City a means of identifying businesses seeking City contracts.
