

***** TO BE COMPLETED BY CONTRACTOR *****

FILE# _____
(To be assigned)

Transmittal Date: ___/___/___

SCR/Division of Economic Opportunity & Regulatory Compliance

TO: _____

FROM: _____

PHONE: _____

EMAIL: _____

PRE-AWARD CONFERENCE ATTENDANCE DATE: _____/_____/_____

Contractor Name:

(a) Project Name: _____

(b) Project Address: _____ Borough: _____



HPD CONTRACTOR AFFIRMATION STATEMENT

SECTION I – ENTITY INFORMATION

Entity Name: _____

Employer Identification Number or Federal Tax I.D.: _____ DUNS Number: _____

List the names and addresses of all individuals holding an ownership interest in the entity. If the individual is also an officer, director or member of the entity, insert the individual’s position in the entity in the “Position/Title” column:

Name	Home Address	Interest Owned (%)	Position/Title

List the names and addresses of all persons who have duties, responsibilities or authority as officers, members or directors of the entity. These persons have no ownership interest in the entity:

Name	Home Address	Position/Title

Do any owners, officers, members or directors listed above currently own, manage, control, or have any interest in any subsidiaries, corporations, partnerships, limited liability companies, limited liability partnerships, firms, non-profit organizations, or other entities?

Yes

No

If the answer is Yes, complete the table below:

Name	Entity Name	EIN

SECTION 2: ENTITY PROFILE

Please identify the ethnicity of the majority ownership of the firm:

White

Black

Hispanic

Asian

Native American

Hasidic Jew

Please identify the gender of the majority ownership of the firm:

Male

Female

SECTION 3: YOUR PROJECT

The City of New York
Department of Housing Preservation & Development
(Pursuant to delegation from Small Business Services/Division of Labor Services)

LESS THAN \$750,000 SUBCONTRACT CERTIFICATE
(CITY, STATE AND ICIP ONLY)

**LESS THAN \$750,000 SUBCONTRACT CERTIFICATE
(CITY, STATE AND ICIP ONLY)**

Are you currently certified as one of the following? Please check yes or no:

MBE: Yes No WBE: Yes No LBE: Yes No
DBE: Yes No EBE: Yes No

If you are certified as an MBE, WBE, LBE, EBE or DBE, what city/state agency are you certified with?

Please check one of the following if your firm would like information on how to certify with the City of New York as a:

- | | |
|------------------------------------|-----------------------------------|
| Minority Owned Business Enterprise | Locally based Business Enterprise |
| Women Owned Business Enterprise | Emerging Business Enterprise |
| Disadvantaged Business Enterprise | |

Company Name

Employer Identification or Tax ID No.

Company Address and Zip Code

Contact Person (First Name, Last Name)

Telephone Number

Fax Number

E-mail Address

Are you a Union contractor? Yes No

If yes, please list which local(s) you affiliated with:

Are you a Veteran owned company? Yes No

HPD Revised 11 2016

FOR OFFICIAL USE ONLY: File No. _____

Contract Information:

Project Name:

Project Location:

Project Start Date: ____/____/____

Project End Date: ____/____/____

Description of Work:

Contract Amount:

Block and Lot Number:

Contract Registration Number (CT#)
City contracts only

Procurement Identification No. (PIN)
(City contracts only)

I, (name of authorized official signing):

hereby certify that I am authorized by the above-named subcontractor to certify that said subcontractor's proposed proposed contract with the above named owner or City agency is less than \$750,000. This affirmation is made in accordance with NYC Charter Chapter 56, Executive Order No. 50 (1980) and the implementing Rules.

Pursuant to Section 50.73 of the rules and regulations implementing E.O. 50, the NYC Department of Small Business Services ("SBS") has delegated to the Department of Housing Preservation & Development ("HPD") the authority to implement, monitor compliance with, and enforce E.O. 50 with respect to loans and/or contracts entered into and awarded by HPD.

Willful or fraudulent falsifications of any data or information submitted herewith may result in the termination of the contract between the City and the bidder or contractor and in disapproval of future contracts for a period of up to five years. Further, such falsification may result in civil and/or criminal prosecution.

Signature of authorized official

Title

Date