

AFFIRMATION

The undersigned Contractor affirms and declares that it 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 Contractor to receive public contracts except

(If none, so state):

Full Name of Contractor: _____

Address: _____

City: _____

State: _____

Zip: _____

CHECK ONE (1) BOX AND INCLUDE APPROPRIATE NUMBER:

- ☐ A. Individual or Sole Proprietorship*
SOCIAL SECURITY NUMBER:
- ☐ B. Partnership, Joint Venture or other Unincorporated
Organization EMPLOYER IDENTIFICATION NUMBER:
- ☐ C. CORPORATION
EMPLOYER IDENTIFICATION NUMBER:

BY: _____
(SIGNATURE) (TITLE)

Must be signed by an officer or duly authorized representative

* Under the Federal Privacy Act the furnishing of Social Security Numbers by bidders on City contracts is voluntary. Failure to provide a Social Security Number will not result in a bidder's disqualification. Social Security Numbers will be used to identify bidders, proposers or vendors to ensure their compliance with laws, to assist the City in enforcement of laws as well as to provide the City a means of identifying businesses which seek City Contracts.