AFFIRMATION

The undersigned prospective awardee/contractor affirms and declares that said prospective awardee/contractor 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 prospective awardee/contractor to receive public contracts.

Addres	SS
	State
Zip	
CHEC	K ONE 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
Bv·	
- J ·	Signature

If a corporation, place seal here:

Under the Federal Privacy Act the furnishing of a Social Security Number by prospective awardees/contractor on City contracts is voluntary. Failure to provide a Social Security Number will not result in disqualification. Social Security Numbers will be used to identify prospective awardees/contractor to ensure their compliance with law and regulation and to assist the City in enforcement these laws and regulations.