Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

Please complete the attached contractor affidavit (e-Verify) form and return it to contracts@facilities.gatech.edu. E-Verify affidavits must be obtained for **each** contract.

Note: The form **must be** notarized.

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of **The Board of Regents of the University System of Georgia by and on behalf of Georgia Institute of Technology** has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

E-Verify Company Identification Number _____

Date of Authorization _____

Name of Contractor _____

Name of Project _____

Name of Public Employer The Board of Regents of the University System of Georgia
By and on behalf of Georgia Institute of Technology

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 20____ in _____(city), _____(state).

_____   _____
Signature of Authorized Officer   Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____,20____.

NOTARY PUBLIC _____

My Commission Expires: _____