

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 Georgia Housing and Finance Authority or the Georgia Department of Community Affairs 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) (form attached - submit subcontractor forms to GHFA). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal E-Verify Number

Date of Authorization

Name of Contractor: _____

[Note that Contractor must obtain and submit "Subcontractor Affidavits" as necessary to GHFA. Authorized Officer or Agent must check one of the two boxes below:

All or part of funds under the July 1, 2011 GHFA Agreement will be subcontracted. Affidavits attached.

None of the funds under the July 1, 2011 GHFA Agreement will be subcontracted. Subcontractor affidavits are not applicable to this Agreement.]

Name of Project:

Name of Public Employer: **Georgia Housing and Finance Authority (GHFA)**

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

Executed on _____, _____, 201__ in _____(city), _____(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:
