

City of Holly Springs

CONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. §§13-10-91(b)(1) (b)(1), stating affirmatively that the individual, firm, or corporation which is contracting with the City of Holly Springs has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA) P.L. 99-603), in accordance with the applicability provisions and deadlines established in O.C.G.A. §13-10-91(b)(1).

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract the City of Holly Springs, contractor will secure from such contractor(s) similar verification of compliance with O.C.G.A. §13-10-91(b)(1) on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Holly Springs at the time the subcontractor(s) is retained to provide the service.

E-Verify * User Identification Number Date Registered Legal Company Name Company Address BY: Authorized Officer or Agent (Contractor Signature) Title of Authorized Officer or Agent of Contractor Printed Name of Authorized Officer or Agent SUBSCRIBED AND SWORN BEFORE ME ON THIS		
Company Address BY: Authorized Officer or Agent (Contractor Signature) Title of Authorized Officer or Agent of Contractor Printed Name of Authorized Officer or Agent SUBSCRIBED AND SWORN BEFORE ME ON THIS	E-Verify * User Identification Number	Date Registered
BY: Authorized Officer or Agent (Contractor Signature) Title of Authorized Officer or Agent of Contractor Printed Name of Authorized Officer or Agent SUBSCRIBED AND SWORN BEFORE ME ON THIS DAY OF, 201 AFFIX SEAL Notary Public	Legal Company Name	
(Contractor Signature) Title of Authorized Officer or Agent of Contractor Printed Name of Authorized Officer or Agent SUBSCRIBED AND SWORN BEFORE ME ON THIS DAY OF, 201 Notary Public AFFIX SEAL	Company Address	
Printed Name of Authorized Officer or Agent SUBSCRIBED AND SWORN BEFORE ME ON THIS	_	Date
SUBSCRIBED AND SWORN BEFORE ME ON THIS DAY OF, 201 AFFIX SEAL Notary Public	Title of Authorized Officer or Agent of Contractor	
DAY OF, 201 AFFIX SEAL Notary Public	Printed Name of Authorized Officer or Agent	
Notary Public		
•	N. (D. 11'	AFFIX SEAL
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^{*}As of the effective date of O.C.G.A. §13-10-91(b)(1), the applicable federal work authorization program is the "EEV/Basic Rule Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in Conjunction with the Social Security Administration (SSA).