

NEW

VENDOR

PACKET

SEND INFORMATION AND
DOCUMENTATION TO:

Pgryczkowski@sumtercountyga.us

Please use this link to fill out the W9 form:

<https://www.irs.gov>

- Type "W9 form" in the search box
- Fill out the form
- Save and attach to the e-mail with the other required documentation

Other Business Entity documentation:

- Licenses as required by State, Federal, and Local laws or as deemed reasonably necessary which is the discretion of the County; and
- Certifications; and
- Proof of registration with the State; and
- Proof of insurance

Georgia Security & Immigration Compliance Act
Contractor Affidavit and Agreement under O.C.G.A. § 13-10-91(b)(1)

COUTY OF SUMTER
STATE OF GEORGIA

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 **SUMTER COUNTY, a public agency or governing authority**, 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:

_____ Name of Contractor	FEI or SSN: _____ E-Verify:_____
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Address:_____

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

Executed on _____, 20 in Americus, Georgia.

Signature of Authorized Officer or Agent (Contractor)

Printed Name and Title of Authorized Officer or Agent (Contractor)

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE.____ DAY OF _____, 20.

NOTARY PUBLIC
My Commission Expires: _____