



Office of Equal Opportunity
601 Lakeside Ave, Room 335
Cleveland, Ohio 44114
216.664.4152

AFFIDAVIT OF CERTIFICATION

A signed affidavit with original signature must accompany each application.

The undersigned swears that the foregoing statements made as part of this application are true and correct and include all material information necessary:

- 1. To identify and explain the operations of (Name of Company)

- 2. To identify the ownership thereof; and

- 3. To establish their eligibility for certification as a

- Cleveland Small Business,
Minority Business Enterprise,
Female Business Enterprise,
Local Producer Enterprise, and/or
Local Sustainable Business Enterprise

Further, the undersigned agrees to provide any and all information and materials as may be required to substantiate the ownership and control by (name) _____ of the company. This includes complete cooperation with the certifying entity and allowing the examination of books, records and files of the named company at the business location or at any other place. It is understood that any material misrepresentation will be grounds for terminating any contract which may be awarded and for imposing sanctions under federal, state or local laws concerning false statements. Please note that the information provided with this application may be subject to such laws. If, after filing this document there is any change (during the ensuing calendar year) in the information submitted herein, the undersigned will inform the Office of Equal Opportunity immediately of the change(s).

NOTARIZATION: (Sign only in the presence of a Notary Public)

Signature: _____
Name (print): _____
Title: _____
Date: _____

State of _____ County of _____

On this the _____ day of _____ 20____, before me appeared

(Name) _____ that he or she was properly authorized by

(Name of Firm) _____, to execute the Affidavit and did so as his or her free act and deed.

(Seal) Notary Public _____ My Commission Expires _____