

Barrow County School System

Boldly Committed to Student Success

SERVICES VENDOR REQUIREMENTS

The following information is required for your company to do business with Barrow County School System. ALL information must be received before your company does business with the Barrow County School System.

Date Received

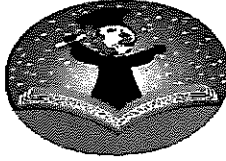
_____ Vendor Address Form

_____ E Verify Form(s) - Contractor Affidavit under O.C.G.A § 13-10-91
(b) (1), (b) (3) & (b) (4)

_____ W-9 Form - Request for Taxpayer Identification Number and
Certification "tax exempt vendor"

_____ ACORD - Certificate of Liability Insurance "indicating Barrow
County School System as a Certificate Holder. See attached
guidelines for insurance requirements. This Certificate should come
from the Agent; not the Vendor.

_____ Copy of State License – Electrical, HVAC and Plumbing



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Vendor Address Form

| | |
|-------------------------------|--|
| Business Name | |
| Business Address | |
| Remit to Address | |
| City | |
| State | |
| Zip Code | |
| | |
| Phone Number | |
| Fax Number | |
| Contact Name | |
| Email Address | |
| | |
| Tax ID | |
| Social Security # | |
| | |
| | |
| <i>Please Select One</i> | |
| New Vendor | |
| Change of Type | |
| Business Name Change | |
| Contracted Services | |
| School System Employee | |

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

_____ [insert name of public employer] 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:

_____ Federal Work Authorization User Identification

_____ Number Date of Authorization

_____ Name of

_____ Contractor Name

_____ of Project

_____ Name of Public Employer

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

Executed on _____, 20____ 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 _____, 20____

_____ NOTARY PUBLIC

My Commission Expires: _____, 20____

Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor 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 under a contract with _____ [insert name of contractor] on behalf of the _____ [insert name of public employer] 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 subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91 (b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, a copy of the notice to the contractor. Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Subcontractor

Name of Project

Name of Public Employer

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

Executed on _____, 20____ 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 _____, 20____

NOTARY PUBLIC
My Commission Expires: _____, 20____

Sub-subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(4)

By executing this affidavit, the undersigned sub-subcontractor 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 under a contract for

_____ [insert name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract] **and** _____ [insert name of contractor] on behalf of the _____ [insert name of public employer] 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 sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this **affidavit to** _____ [insert name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract]. Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a sub-subcontractor to _____ [insert name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract]. Sub-subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Sub-subcontractor

Name of Project

Name of Public Employer

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

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

Signature of Authorized Officer or Agent

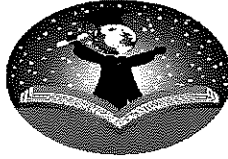
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 20____

NOTARY PUBLIC

My Commission Expires: _____, 20____



Barrow County School System

Boldly Committed to Student Success

Standard Insurance Limits for Goods and Ancillary Services

| | |
|---|--|
| Workers Compensation (WC): | Statutory Limits – required in all contracts |
| Bodily injury by Accident – each employee | \$100,000 |
| Bodily injury by Disease – each employee | \$100,000 |
| Bodily injury by Disease – policy limit | \$500,000 |
| Commercial General Liability (CGL): | |
| Each Occurrence Limit | \$1,000,000 |
| Personal & Advertising Injury Limit | \$1,000,000 |
| General Aggregate Limit | \$2,000,000 |
| Products/Completed Ops. Aggregate Limit | \$2,000,000 |
| Automobile Liability | |
| Combined Single Limit | \$1,000,000 |

Additional Insured: The vendor shall add the “Barrow County Board of Education” as an additional insured under the commercial general liability policy. This will need to be noted in the description area of the certificate and/or checked off in the additional insured column.