



HABERSHAM COUNTY  
GEORGIA | Est. 1818

**Office of County Commissioners**

130 Jacobs Way, Suite 302, Clarkesville, GA 30523

706-839-0200

[www.habershamga.com](http://www.habershamga.com)

**REQUEST FOR PROPOSALS**

Habersham County Board of Commissioners is soliciting proposals for: <b>Waste Disposal Service</b>	
<b>RFP Released</b>	April 24 <sup>th</sup> , 2024
<b>Deadline for Proposal Questions</b>	May 2 <sup>nd</sup> , 2024, by 2:00 PM EST
<b>Proposals due</b>	May 8 <sup>th</sup> , 2024, by 2:00 PM EST
<b>Tentative Award Date</b>	May 15 <sup>th</sup> , 2024

SUBMIT PROPOSALS TO:

Habersham County  
Purchasing, Finance Department  
"Waste Disposal Service"  
130 Jacobs Way, Suite 302  
Clarkesville, GA 30523  
[purchasing@habershamga.com](mailto:purchasing@habershamga.com)  
706-839-0200



**Office of County Commissioners**  
**Waste Disposal**  
**Proposal Due Wednesday May 8th, 2024**  
**2:00 PM EST**

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## **Submittal Requirements**

Each bidder must submit their proposal, enclosed in a sealed envelope or box, and marked with the bidders' name, address and labeled: **Waste Disposal Service** and addressed to:

Habersham County  
Purchasing, Finance Department  
130 Jacobs Way, Suite 302  
Clarkesville, GA 30523

Proposals shall be received no later than **2:00 PM, Wednesday May 8th, 2024** at Habersham County's Administration Building at 130 Jacobs Way, Clarkesville, GA 30523, at which time and place all proposals will be publicly opened and acknowledged.

Hand delivered copies may be delivered to the above address ONLY between the hours of 8:00 AM and 5:00 PM, Monday through Friday, to the Board of Commissioners Office, Room No. 337 located on the top floor, excluding holidays observed by the Habersham County Board of Commissioners. For a complete listing of holidays, please visit <http://www.habershamga.com>.

## **Qualifications and Experience**

Proposals must provide the following information to establish the qualifications and experience of the Bidder:

1. Certification that the Bidder or its officers or any predecessor companies are not under any part of the Bankruptcy Act nor ever filed under the Bankruptcy Act within the previous seven years.

## **Terms & Conditions**

1. The initial term of a contract awarded as a result of this RFP shall be from date of award through completion of contract.
2. Submittals received after the due date and time will not be considered. Modifications received after the due date will not be considered. The Habersham County Government assumes no responsibility for the premature opening of a proposal not properly addressed and identified, and/or delivered to the improper designation.
3. Habersham County reserves the right to reject any and all proposals. The County will not discriminate against any vendor submitting a bid because of race,

creed, color, national origin, or handicap. The County is an equal opportunity employer.

4. Habersham County encourages all proposers to promote opportunities for diverse business, including Minority Business Enterprises (“MBE”), Female Business Enterprises (“FBE”), and Small Business Enterprises (“SBE”) to be included as sub-consultants and/or bidders. However, nothing herein should be construed to indicate that a MBE, FBE, or SBE may not apply and be selected independently. MBEs, FBEs, and SBEs that meet qualifications of this RFP are encouraged to submit their proposals for consideration.

5. Habersham County reserves the right to exercise discretion and apply its judgement with respect to all bid proposals submitted. The County also reserves the right to reject all proposals, either in part or in its entirety, or to request and obtain, from one or more of consulting firms submitting proposals, supplementary information as may be necessary for County staff to analyze the bid proposals.

6. Habersham County may elect to award a contract in multiple phases, as is deemed to be in the County’s best interest. Should the County award projects in phases, the County reserves the right to award the phases to the same firm. All proposals submitted in response to the RFP become property of Habersham County and public records and will be subject to public view.

7. All proposals shall constitute, for a period of 90 calendar days, an irrevocable offer to provide the goods/services set forth in the specifications and proposal.

8. At no time shall the successful vendor reproduce Habersham County’s logo, return address or any other identifying or proprietary information for any other purpose. Also, the vendor shall not use Habersham County in any advertisements without the written consent of the County. Refer to [https://www.habershamga.com/document\\_center.cfm?fid=277&ysnDC=1](https://www.habershamga.com/document_center.cfm?fid=277&ysnDC=1); County Commissioners Documents and Information; to download a copy of the Application for Permission to Use County Logo.

9. Habersham County Government is tax exempt. The selected vendor will be provided with Habersham County’s Sales and Use Tax Certificate of Exemption number upon request.

10. All bidders will be required to provide a Certificate of Insurance as proof of insurance and Workman’s Compensation Insurance while under contract with Habersham County. Workman’s Compensation Insurance should be as required by the State of Georgia.

11. Information provided within the bidder's proposal are subject to open records request per Georgia Law. For more information, please visit <https://www.habershamga.com/open-records-request.cfm>.

12. Habersham County follows the purchasing policies and procedures adopted on December 14, 2015 through Habersham County Ordinance to Chapter 1; Article 4, Division 2. Refer to [http://www.habershamga.com/document\\_center.cfm?fid=339&synDC=1](http://www.habershamga.com/document_center.cfm?fid=339&synDC=1); Finance Department Policies; for complete document.

### **Insurance Coverage Requirements**

ALL BIDDERS MUST FURNISH PROOF OF LIABILITY INSURANCE, WORKER'S COMPENSATION LIABILITY INSURANCE, AND ANY OTHER INSURANCE REQUIRED BY APPLICABLE STATE, FEDERAL, AND ADMINISTRATIVE LAW.

Such proof shall be submitted with the bid/proposal and show evidence of insurability satisfactory to Habersham County as to form and content. If the bid is selected by the County, the Bidder must maintain, at a minimum, the insurance policies and minimums indicated in the selected bid. If the Bidder maintains broader coverage and/or higher limits than shown in the bid, Habersham County shall be entitled to coverage for the higher limits maintained by the Bidder.

Any and all Insurance Coverage(s) and Bonds required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Habersham County. Evidence of said insurance coverages shall be provided on or before the inception date of the Contract.

Bidder shall provide written notice to Habersham County immediately if it becomes aware of or receives notice from any insurance company that coverage afforded under such policy or policies shall expire, be cancelled, or altered.

Certificates of Insurance are to list Habersham County Government, its' Officers, Officials and Employees as an Additional Insured (except for Workers' Compensation and Professional Liability). This insurance shall apply as Primary Insurance before any other insurance or self-insurance, including any deductible, non-contributory, and Waiver of Subrogation provided in favor of Habersham County. If Habersham County shall request, the Bidder will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.

The obligations for the Bidder to procure and maintain insurance shall not be constructed to waive or restrict other obligations. It is understood that neither failure to comply nor full compliance with the foregoing insurance requirements shall limit or relieve the Bidder from any liability incurred as a result of their activities/operations in conjunction with the Contract and/or Scope of Work.

### **Purchasing/Invoicing**

1. Monthly invoices must include the following information for each pick-up location:
  - Size of Dumpsters
  - Number of trash pickups per week, per dumpster
  - Days of week trash is picked up
  - Approximate time of day of trash pick-up
2. Invoices will be paid within 30 days of receipt.

### **Scope Of Work**

1. Provide Waste Disposal to the following locations: Habersham County Extension Service, Administrative Building, Courthouse, Facilities Management Office, Road/Fleet Department, Recreation Department, Fairgrounds, Animal Care & Control Shelter, Sheriff/Detention Center, Fire Station #9, Fire Station #12, Fire Station #13, Fire Station #14, Fire Station #16, Fire Station #17, Senior Center, 911 Dispatch Center, Gymnastics Center, EMS Station and Mountain Judicial Accountability Treatment Center. (See attached schedule for physical location).
2. The awarded bidder will be responsible for providing Habersham County with a Direct Dispatch Information to include account contact name and phone number. Dispatch must be accessible from 8:00am – 5:00pm.
3. The awarded bidder will place state and federally approved covered containers at all locations as noted on Scope of Work, #1. The awarded bidder is responsible for the care and maintenance of all containers under this contract.
  - a. All containers must bear the signage stating, “NO PARKING” and “PRIVATE – NO PUBLIC DUMPING ALLOWED”
  - b. Any container that becomes unfit for refuse storage, or loses its protection against vermin, shall be replaced at no cost to the County.
  - c. Should a container need replacing, a replacement container must be on-site within 24 hours.
  - d. Should additional containers be required at a later date, they will be provided at existing contracted pricing.
4. The awarded bidder will be responsible for providing Habersham County with a pick-up schedule which shall include all containers’ locations, how often they

are to be picked up, day they will be picked up, and time. No deviation from the original schedule will be allowed unless written notification is provided and approved by Habersham County. Habersham County will not be required to pay an overage fee due to awarded bidder missing scheduled pickups.

5. The awarded bidder will be responsible for any damage to a building or other property caused by drivers/workers while performing the work indicated in these specifications.
6. It shall be the responsibility of the awarded bidder to pay all costs incurred from a cleanup associated with an environmental hazard created by way of release, spill, leak, or other means of contamination caused by accident or negligence.
7. In the instance of Holidays (observed by Habersham County), the awarded bidder may schedule an alternate pick-up day; the day before the holiday or the day after, if they so choose.
8. The awarded bidder agrees to ONLY utilize the Habersham County Landfill for Habersham County waste disposal.

### **Questions and Interpretations**

No inquiries or interpretation of meaning concerning this Request for Proposal will be made to any interested party orally. Every inquiry or request for interpretation should be made in writing via e-mail. All inquiries and requests for interpretation should be sent via e-mail to [purchasing@habershamga.com](mailto:purchasing@habershamga.com). All questions and all answers will be posted on the website [www.habershamga.com](http://www.habershamga.com). It will be the responsibility of interested parties to periodically check the website for any new information.

VENDOR:			
SITE NO.	DESCRIPTION	AMOUNT	
<u>LIST OF FACILITIES MANAGEMENT WASTE DISPOSAL</u>			
1	Habersham County Extension Service 555 Monroe Street Clarkesville, GA 30523	One (1) 2 yard - Once every 2 weeks Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$
2	Habersham County Courthouse 295 Llewellyn Street Clarkesville, GA 30523	One (1) 8 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
3	Habersham Facilities Maintenance 4306 Toccoa Highway Clarkesville, GA 30523	One (1) 8 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
4	Fire Station 9 - Hollywood 4263 Hollywood Highway Clarkesville, GA 30523	One (1) 4 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
5	Habersham County Fairgrounds 4235 Toccoa Highway Clarkesville, GA 30523	One (1) 8 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
6	Station 12 - View 2975 Duncan Bridge Road Cornelia, GA 30531	One (1) 4 yard - Once every 2 weeks Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$
7	Station 13 - Habersham Mills 2665 Habersham Mills Road Clarkesville, GA 30523	One (1) 2 yard - Once every 2 weeks Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$
8	Station 14 - Camp Creek 6400 Camp Creek Road Mt. Airy, GA 30563	One (1) 2 yard - Once every 2 weeks Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$

VENDOR:			
SITE NO.	DESCRIPTION	AMOUNT	
<u>LIST OF FACILITIES MANAGEMENT WASTE DISPOSAL</u>			
9	Habersham County Airport 1112 Airport Rd Cornelia, GA 30531	One (1) 2 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
10	Animal Care & Control 4123 Toccoa Highway Clarkesville, GA 30523	One (1) 6 yard - Twice a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
11	Habersham Parks & Recreation Dept 120 Paul Franklin Road Clarkesville, GA 30523	Two (2) 8 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
12	Habersham County Senior Center 217 Scoggins Drive Demorest, GA 30535	One (1) 4 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
13	Habersham County 911 Dispatch 175 EOC Drive Mt. Airy, GA 30563	One (1) 6 yard - Once a week Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$



14	Station 17 - Panther Creek 4455 The Orchard Road Clarkesville, GA 30523	One (1) 2 yard - Once every 2 weeks	
		Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$
15	Habersham County Sheriff's Office 1000 Detention Drive Clarkesville, GA 30523	One (1) 8 yard - Twice a Week	
		Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
16	Habersham County Gymnastics Center 585 Grant Street Clarkesville, GA 30523	One (1) 2 yard - Once a week	
		Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$

VENDOR:			
SITE NO.	DESCRIPTION		AMOUNT
<u>LIST OF FACILITIES MANAGEMENT WASTE DISPOSAL</u>			
17	Habersham County Fleet & Road Department 4218 Toccoa Highway Clarkesville, GA 30523	One (1) 8 yard - Once a week	
		Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
18	Habersham County EMS Station 125 Robertson Loop Road Demorest, GA 30535	One (1) 2 yard - Once a week	
		Bi-Weekly Cost	\$
		No loading dock access	
		X 26 Weeks	\$
19	Habersham County Administration Building 130 Jacobs Way Clarkesville, GA 30523	One (1) 8 yard - Once a week	
		Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
20	Habersham County Accountability Court 390 Rockford Cove Road Mt. Airy, GA 30563	One (1) 2 yard - Once a week	
		Weekly Cost	\$
		No loading dock access	
		X 52 Weeks	\$
21	Habersham County Elections 403 Habersham County Shopping Ctr, Cornelia, GA 30531	One (1) 2 yard - Once every two weeks	
		Bi-Weekly Cost	\$
		X 26 Weeks	\$

**ADDITIONAL FEES**

Dumpster Delivery Fee (All size, if difference per size please notate)										
Dumpster Removal Fee										\$
Dumpster Relocation Fee (Whether on same property or moved to a different property)										\$
Dumpster Overflow Fee (Not applicable if Vendor has missed scheduled pickups)										\$
Additional Fee:										\$
Additional Fee:										\$
Additional Fee:										\$
Additional Fee:										\$
Additional Fee:										\$
Additional Fee:										\$

**ame for the full duration of the contract\***

**BIDDERS DECLARATION**

The bidder understands, agrees and warrants:

That the bidder has carefully read and fully understands the full scope of the requirements.

That the bidder has the capability to successfully undertake and complete the responsibilities and obligations in said specifications.

That the bidder has liability insurance and a declaration of insurance form will be provided before the commencement of any work.

That this bid may be withdrawn by requesting such withdrawal in writing at any time prior to **May 8th, 2024 at 2:00 p.m.** but may not be withdrawn after such date and time.

That Habersham County reserves the right to reject any or all bids and to accept that bid which will, in its opinion, best serve the public interest. Habersham County reserves the right to waive any technicalities and formalities in the bidding.

That by submission of this bid the bidder acknowledges that Habersham County has the right to make any inquiry or investigation it deems appropriate to substantiate or supplement information supplied by the bidder.

If a partnership, a general partner must sign.

If a corporation, the authorized corporate officer(s) must sign and the corporate seal must be affixed to this bid.

**BIDDER:**

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

**AFFIX CORPORATE SEAL (If Applicable)**

**NON-COLLUSION AFFIDAVIT**

The following affidavit is to accompany the bid:

**STATE OF** \_\_\_\_\_

**COUNTY OF** \_\_\_\_\_

Owner, Partner or Officer of Firm, \_\_\_\_\_  
**Company Name, Address, City and State**

Being of lawful age, being first duly sworn, on oath says that he/she is the agent authorized by the bidder to submit the attached bid. Affidavit further states as bidder, that they have not been a party to any collusion among bidders in restraint of competition by agreement to bid at a fixed price or to refrain from bidding; or with any office of Habersham County or any of their employees as to quantity, quality or price in the prospective contract; or any discussion between bidders and any official of Habersham County or any of their employees concerning exchange of money or other things of value for special consideration in submitting a sealed bid for:

**FIRM NAME** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**TITLE** \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of 20\_\_

\_\_\_\_\_  
**NOTARY PUBLIC**

**CERTIFICATE OF NON-DISCRIMINATION**

In connection with the performance of work under this contract, the bidder agrees as follows:

The bidder agrees not to discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, ancestry or disability. The vendor shall take affirmative action to insure that employees are treated without regard to their race, creed, color, sex, national origin, ancestry or disability. Such action shall include, but not be limited to the following: employment, upgrading, demotion, transfer, recruiting or recruitment, advertising, lay-off or termination, rates of pay or other compensation and selection for training, including apprenticeship.

In the event of the bidder's non-compliance with this non-discrimination clause, the contract may be canceled or terminated by Habersham County. The bidders may be declared, by Habersham County, ineligible for further contracts with Habersham County until satisfactory proof of intent to comply shall be made by the vendor. The bidder agrees to include this non-discrimination clause in any sub-contracts connected with the performance of this agreement.

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**BIDDER**

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**SIGNATURE**

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**TITLE**

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on IRS.gov for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



**Office of County Commissioners**  
555 Monroe Street, Unit 20, Clarkesville, GA 30523  
706-839-0200 Fax: 706-839-0219  
[www.habershamga.com](http://www.habershamga.com)

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**STATE OF GEORGIA  PROGRAM VENDOR/CONTRACTOR  
AFFIDAVIT AND AGREEMENT**

**COMES NOW** before me, the undersigned officer duly authorized to administer oaths, the undersigned contractor, who, after being duly sworn, states as follows:

By executing this affidavit, the undersigned contractor verifies it's 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 Habersham County 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 are as follows:

\_\_\_\_\_  
EEV / Basic Pilot Program User ID Number (E-Verify)

**FURTHER AFFIANT SAYETH NOT.**

\_\_\_\_\_  
BY: Authorized Officer or Agent Signature

\_\_\_\_\_  
Contractor Address

\_\_\_\_\_  
Title of Authorized Officer or Agent of Contractor Above

\_\_\_\_\_  
Company / Contractor Name

\_\_\_\_\_  
Contractor City, State, Zip Code

\_\_\_\_\_  
Date of Contract between Contractor and Habersham County

**Sworn to and subscribed before me**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

\* Any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program 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. As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV I Basic 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).