## DESIGN PROFESSIONAL AFFIDAVIT AND CERTIFICATE OF COMPLIANCE

**GEORGIA SECURITY AND IMMIGRATION CERTIFICATION**

## (Federal And State Work Authorization Programs)

**STATE OF GEORGIA;**

**COUNTY OF :**

**BOR Project No.**

**Project Name:**

**DESIGN PROFESSIONAL AFFIDAVIT, CERTIFICATE AND AGREEMENT**

**COMES NOW** before me, the undersigned officer duly authorized to administer oaths, the undersigned design professional (“Design Professional”), who, after being duly sworn, states, warrants, agrees and certifies as follows to the Board of Regents of the University System of Georgia (“Owner”), and       (“Using Agency”):

1.

By executing this affidavit, Design Professional verifies and warrants its compliance with O.C.G.A. §13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.01, and the U.S. Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603. Design Professional must register and verify information of all new employees at <https://www.vis-dhs.com/EmployerRegistration> (the E Verify program) or 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 to verify information of newly hired employees, pursuant to the IRCA. Design Professional affirmatively certifies that it has registered with and is participating in a federal work authorization program in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02, as initialed below.

2.

Design Professional verifies and warrants it employs the following federal verification program(s):

\_\_\_\_\_\_\_\_\_ <https://www.vis-dhs.com/EmployerRegistration> (E Verify program)

\_\_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verification Program User ID or Registration No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.

The Design Professional further warrants and agrees that all subcontractors, suppliers and consultants contracted in connection with the provision of materials and equipment or performance of services or work for the Project described above shall be required prior to the commencement of any work on the project to supply the Subconsultant Certification verifying compliance with O.C.G.A. §13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.01, and the U.S. Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603 and paragraph 5 below. Subconsultant must register and verify information of all new employees at <https://www.vis-dhs.com/EmployerRegistration> (the E Verify program) or other federal verification program. The affidavit must contain the certifications required by Georgia Department of Labor Rule 300-10-1-.08 and the requirements set forth herein. The Design Professional shall maintain records of compliance and provide a copy of each such certification to the Owner and Using Agency as set forth in paragraph 5 below. Design Professional warrants that Design Professional has included this requirement in all written agreements with any subcontractors engaged to perform services for this Project.

4.

The Design Professional further warrants and agrees to comply with the President’s Executive Order 13224, which mandates that no U.S. company shall do business with any person (Prohibited Person) who has been determined to have committed, or pose a risk of committing or supporting terrorist acts, and those identified on the list of Specially Designated Nationals and Blocked Persons, generated by the Office of Foreign Assets Control (“OFAC”). The OFAC list is updated regularly, and an up-to-date OFAC list can be obtained from the U.S. Department of the Treasury website at <http://www.ustreas.gov/ofac>. This Executive order extends to “Affiliates,” which includes any other person or entity who, directly or indirectly, is in control of, is controlled by or is under common control with any Prohibited Person. A copy of the Executive Order can be obtained at <http://www.ustreas.gov/offices/enforcement/ofac/sanctions/terrorism.html> and the USA Patriot Act of 2001, restricting terrorist groups’ access to financial resources in the United States can be obtained at <http://www.fincen.gov/pa_main.html> for review. The Design Professional agrees to review its subcontracts and other agreements annually with the Treasury website for compliance, and maintain a record of its reviews.

5.

Design Professional warrants and agrees that it shall submit, and shall ensure all its subcontractors and suppliers submit, the required certifications and verifications (i) at contract execution prior to commencing work or services; (ii) upon the completion or termination of the contract; and (iii) and recertified as of July 15 of each year during the term of the Project. The required certificates must be filed with the Owner and Using Agency and copies maintained by the Design Professional in its Project files and retained for audit as specified in the Project contract. State officials, including officials of the Georgia Department of Labor, officials of the Owner, retain the right to inspect and audit the Project Site and employment records of the Design Professional, subcontractors, suppliers and consultants without notice during normal working hours until Final Completion, and as otherwise specified by law and by Rules and Regulations of the Georgia Department of Labor.

Design Professional Name:

Street/Mailing Address:

City, State, Zip

Telephone Number:

Facsimile Number:

Email Address:

**FURTHER AFFIANT SAYETH NOT.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Design Professional Name

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Officer or Agent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Authorized Officer or Agent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Authorized Officer or Agent

Sworn to and subscribed before me

by the affiant named above as of this

\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

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

## CONSULTANT AND

## SUBCONSULTANT AFFIDAVIT AND CERTIFICATE OF COMPLIANCE

**GEORGIA SECURITY AND IMMIGRATION CERTIFICATION**

## (Federal And State Work Authorization Programs)

**STATE OF GEORGIA;**

**COUNTY OF :**

**BOR Project No.**

**Project Name:**

**CONSULTANT AFFIDAVIT, CERTIFICATE AND AGREEMENT**

**COMES NOW** before me, the undersigned officer duly authorized to administer oaths, the undersigned consultant, supplier or subconsultant (“Consultant”), who, after being duly sworn, states, warrants, agrees and certifies as follows to the Board of Regents of the University System of Georgia (“Owner”), and to       (“Using Agency”):

1.

By executing this affidavit, Consultant verifies and warrants its compliance with O.C.G.A. §13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.01, and the U.S. Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603. Consultant must register and verify information of all new employees at <https://www.vis-dhs.com/EmployerRegistration> (the E Verify program) or 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 to verify information of newly hired employees, pursuant to the IRCA. Consultant affirmatively certifies that it has registered with and is participating in a federal work authorization program in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02, as initialed below.

2.

Consultant verifies and warrants it employs the following federal verification program(s):

\_\_\_\_\_\_\_\_\_ <https://www.vis-dhs.com/EmployerRegistration> (E Verify program)

\_\_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verification Program User ID or Registration No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.

The Consultant further warrants and agrees that all subcontractors, suppliers and consultants contracted in connection with the provision of materials and equipment or performance of services or work for the Project described above shall be required prior to the commencement of any work on the project to supply the Consultant Certification verifying compliance with O.C.G.A. §13-10-90 *et seq.* and Georgia Department of Labor Rule 300-10-1-.01, and the U.S. Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603 and paragraph 5 below. Consultant must register and verify information of all new employees at <https://www.vis-dhs.com/EmployerRegistration> (the E Verify program) or other federal verification program. The affidavit must contain the certifications required by Georgia Department of Labor Rule 300-10-1-.08 and the requirements set forth herein. The Consultant shall maintain records of compliance and provide a copy of each such certification to the Owner and Using Agency as set forth in paragraph 5 below. Consultant warrants that Consultant has included this requirement in all written agreements with any subcontractors engaged to perform services for this Project.

4.

The Consultant further warrants and agrees to comply with the President’s Executive Order 13224, which mandates that no U.S. company shall do business with any person (Prohibited Person) who has been determined to have committed, or pose a risk of committing or supporting terrorist acts, and those identified on the list of Specially Designated Nationals and Blocked Persons, generated by the Office of Foreign Assets Control (“OFAC”). The OFAC list is updated regularly, and an up-to-date OFAC list can be obtained from the U.S. Department of the Treasury website at <http://www.ustreas.gov/ofac>. This Executive order extends to “Affiliates,” which includes any other person or entity who, directly or indirectly, is in control of, is controlled by or is under common control with any Prohibited Person. A copy of the Executive Order can be obtained at <http://www.ustreas.gov/offices/enforcement/ofac/sanctions/terrorism.html> and the USA Patriot Act of 2001, restricting terrorist groups’ access to financial resources in the United States can be obtained at <http://www.fincen.gov/pa_main.html> for review. The Subontractor agrees to review its subcontracts and other agreements annually with the Treasury website for compliance, and maintain a record of its reviews.

5.

Consultant warrants and agrees that it shall submit, and shall ensure all its subcontractors and suppliers submit, the required certifications and verifications (i) at contract execution prior to commencing work or services; (ii) upon the completion or termination of the contract; and (iii) and recertified as of July 15 of each year during the term of the Project. The required certificates must be filed with the Owner and Using Agency and copies maintained by the Consultant in its Project files and retained for audit as specified in the Project contract. State officials, including officials of the Georgia Department of Labor, officials of the Owner, retain the right to inspect and audit the Project Site and employment records of the Consultant, subcontractors, suppliers and consultants without notice during normal working hours until Final Completion, and as otherwise specified by law and by Rules and Regulations of the Georgia Department of Labor.

Consultant Name:

Street/Mailing Address:

City, State, Zip

Telephone Number:

Facsimile Number:

Email Address:

**FURTHER AFFIANT SAYETH NOT.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Consultant Name

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Officer or Agent

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Printed Name of Authorized Officer or Agent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Authorized Officer or Agent

Sworn to and subscribed before me

by the affiant named above as of this

\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

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