

**MUST BE SUBMITTED WITH PROPOSAL, IF APPLICABLE**

**AFFIDAVIT B**

**INTENT TO PERFORM CONTRACT WITH OWN WORK FORCE**

County of \_\_\_\_\_

Affidavit \_\_\_\_\_  
(Name of Firm)

I, hereby, certify that it is the intent of the aforesaid firm to perform 100% of the work required for the contract:

\_\_\_\_\_  
(Name of Project)

In making this certification, the Proposer states:

- That the proposer does not customarily subcontract elements of this type project,
- Normally performs, has the capability to perform, and will perform all elements of the work on this project with his/her own current work force, and
- Agrees to provide any additional information or documentation requested by the City of Winston-Salem in support of the above statement.

**The following information is requested and may be used during the proposal evaluation process.**

**Bidder certifies that:**

We ( ) are a Historically Underutilized Business (HUB) certified by the State of North Carolina.

We ( ) are a minority business enterprise

We ( ) are not a minority business enterprise

If yes, please identify in the appropriate box below:

- ( ) Black
- ( ) Hispanic
- ( ) Asian American
- ( ) American Indian
- ( ) Female
- ( ) Socially and Economically Disadvantaged
- ( ) Disabled

*\*Minority Categories: Black, African American (B), Hispanic (H), Asian American (AA), American Indian (AI), Female (WF), Socially and Economically Disadvantaged (SE), and Disabled (D).*

In the event the Proposer does not self-perform 100% of the work, the contract will be subject to the M/WBE goals originally established for this project, as well as, good faith efforts and documentation requirements of this program. The utilization of M/WBE firms accounts for 20% of the evaluation and scoring, and will not be allocated to proposals in which an Affidavit B is submitted. A proposer may meet the 10% goal through the participation of M/WBE sub consultants and/or through their own performance on the project if the proposer is a certified minority and/or woman owned firm.

**AFFIDAVIT B CONTINUED**

The undersigned hereby certifies that he/she has read this certification and is authorized to bind the Proposer to the commitments herein contained.

Date: \_\_\_\_\_

Name of Officer: \_\_\_\_\_

Signature

\_\_\_\_\_

Title

\_\_\_\_\_

State of North Carolina, County of \_\_\_\_\_ Subscribed and sworn before me,

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

Notary Public \_\_\_\_\_ My commission expires

\_\_\_\_\_

SEAL