

**SEBE Affidavit**  
**Franklin County Standard Requirements for Public Facility Construction**

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**SEBE PARTICIPATION**

**Statement of Intent to Contract and Perform**

**Bidder or Proposer:** Submit one fully completed form for each SEBE Business

**Project:** \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**A. Bidder or Proposer's Company Name:** \_\_\_\_\_

Mark all that apply:

Multi-Prime Contract     General Contract     CM at Risk Contract     Design-Build Contract

**B. SEBE Business information** (for contract at ANY tier)

Mark all that apply:

Subcontractor     Material Supplier     Professional Services     Goods & Services

SEBE Name: \_\_\_\_\_

SEBE Address: \_\_\_\_\_

SEBE Certification Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Insert detailed description of materials, labor, services, supplies, etc. (may use industry codes – continue on separate page):

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

**C. Certification of Intent**

By signing below, the Bidder or Proposer certifies that it intends to contract with the SEBE Business for the portion of the contract described above related to its Contract for this Project and for the estimated cost shown below. By signing below, the SEBE Business certifies that it intends to contract with the Bidder or Proposer and intends to provide the portion of the contract described above related to the Contract for this Project for the estimated cost of:

\_\_\_\_\_ and \_\_\_\_\_ /100 dollars ( \$ \_\_\_\_\_ ).

In the event the named Bidder or Proposer is NOT awarded a Contract, this Statement shall be null and void.

***SEBE Business***

***Bidder or Proposer***

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

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

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

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Signed

**END OF DOCUMENT**