

ISSUE DATE:	
PROJECT # / NAME:	
SUBCONTRACTOR:	
SUBCONTRACT #:	

AFFIDAVIT OF E-VERIFY EXEMPTION

I,			, a duly autho	rized officer or ag	gent of **Subcor	itracto	or**, do ex	ecute this a	ffidavi	
on beha	alf of **Subo	contractor	r**, and by execu	ting this affidavit,	the undersigned	verif	ies that it is	s a:		
[select	one]:	□sole	proprietorship,	□partnership,	□corporation	or	□other	business	entity	
that has	NO EMPL	OYEES. 1	I assert that I am a	a self-employed in	ndividual that is r	not red	quired to co	omplete Fo	rm I-9.	
			s, should the subc							
	CONTRAC									
Authori	zed Signatu	re:			Date:					
[MUST	BE NOTARI	ZED] Sub	scribed and sworn t	to before me this	day of _		, 20		<u> </u>	
County	of			Signatu	re				[Seal].	
State of	of Notary Public for the State of									