## Certification of "No Employees" under O.C.G.A. § 13-10-91(b)(5)

By signing this form, the undersigned contractor verifies it has no employees and has no plans to hire employees for the purpose of executing the contract (named below) for the College of Coastal Georgia. The contractor agrees to provide the College of Coastal Georgia with a copy of a state issued driver's license or a state issued identification card as proof that he/she is authorized to perform the work related to this contract. Failure to submit this signed statement and/or provide the required license or identification card would prohibit the College of Coastal Georgia from acquiring any additional or future services with this company.

| Name of Contractor                        |                 |                       |      |
|---|-----------------|-----------------------|------|
|   |                 |                       |      |
| Name of Project/Contract                  |                 |                       |      |
|   |                 |                       |      |
| I hereby declare under penalty of perjury | that the forego | ing is true and corre | ect. |
| Executed on                               | (city),         | (state).              |      |
|   |                 |                       |      |
| Signature of Authorized Officer or Agent  |                 |                       |      |
|   |                 |                       |      |
| Printed Name and Title of Authorized Of   | ficer or Agent  |                       |      |

Reminder: Copy of Driver's License Required