

## Small Works Roster Application

Date

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Name of Contractor or Vendor

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Phone Number

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Address

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Fax Number

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E-mail Address

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Federal Tax ID or Social Security No.

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Registration Number L&I

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UBI Number or Business License No.

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Washington State Contractor License  
Number (**Contractors only**)

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Area of Expertise

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All eligible contractors or vendors desiring to be placed on the roster must keep current records of any applicable licenses, certifications, registrations, bonding, insurance, anti-disbarment document or other appropriate matters on file with SVID

SUNNYSIDE DIVISION BOARD OF CONTROL  
SUNNYSIDE VALLEY IRRIGATION DISTRICT  
ROZA-SUNNYSIDE BOARD OF JOINT CONTROL

**DEBARMENT AFFIDAVIT**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, the undersigned, an authorized representative of \_\_\_\_\_  
Firm, Association, Corporation or Business (hereinafter referred to as "Firm") do certify  
that the Firm or any person in a controlling capacity associated therewith or any position  
involving the administration of federal funds; is not currently under suspension,  
debarment, voluntary exclusion, or determination of ineligibility by any federal agency;  
has not been suspended, debarred, voluntarily excluded or determined ineligible by any  
federal agency within the past 3 years; does not have a proposed debarment pending; and  
has not been indicted, convicted or had a civil judgment rendered against said person or  
Firm, by a court of competent jurisdiction in any matter involving fraud or official  
misconduct within the past three years.

\_\_\_\_\_  
Vendor/Contractor's Signature

I certify that I know or have satisfactory evidence that \_\_\_\_\_  
signed this instrument, on oath stated that (he/she) was authorized to execute the  
instrument and acknowledged it as the \_\_\_\_\_ (title) of \_\_\_\_\_  
to be the free and voluntary act of such party of the uses and purposes mentioned in the  
instrument.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

(Seal or stamp)

My appointment expires: \_\_\_\_\_

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**For Sunnyside Valley Irrigation  
District use only**

In lieu of Debarment Affidavit use [www.fsd.gov](http://www.fsd.gov)

Name of Person checking

Date

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