

Purchasing Department

116 West Jefferson Street
Thomasville, Georgia 31799
229-225-4100



4/27/2026
INVITATION TO BID
Traffic Striping

You are invited to submit a sealed bid for providing the following **Traffic Striping** for the Thomas County Board of Commissioners. Attached are the general conditions, standard instructions, bid specification, and bid form. Variation from the given specifications should be noted on the bid form with an explanation of said variation(s) attached. Bids are to be marked with bidder's name and address and labeled: **Bid for "Traffic Striping"** and mailed or delivered to the following address no later than 2:00 p.m.; local time, Friday, May 22, 2026.

Pre-Bid Conference:	<u>05/13/2026</u>	<u>2:00 p.m.</u>
Deadline/Bid opening :	<u>05/22/2026</u>	<u>2:00 p.m.</u>
Committee Review:	<u>06/02/2026</u>	<u>8:30 a.m.</u>
Tentative Award Date:	<u>06/09/2026</u>	<u>8:30 a.m.</u>

Address all bids to:

THOMAS COUNTY BOARD OF COMMISSIONERS
SEALED - Bid for "Traffic Striping"
ATTN: PURCHASING DEPARTMENT
P.O. Box 920
116 West Jefferson Street, Room 220
Thomasville, Georgia 31799

Any inquiries concerning this bid should be made to Nisha Thurman, Purchasing Agent, at the above location or at (229) 225-4100. nisha.thurman@thomascountyga.gov

SPECIAL NOTE: There will be a **MANDATORY** Pre-Bid Conference on Wednesday, May 13, 2026, 2:00 p.m. at the Thomas County Board of Commissioners Office, 2ND floor Conference Room 215. **The Pre-bid Conference is mandatory for anyone that will be submitting a bid.**

PLEASE CALL OR E-MAIL CONFIRMATION OF RECEIPT OF THIS INVITATION TO BID.

GENERAL CONDITIONS

No bids received after said time or at any place other than the time and place stated in the notice will be considered.

WITHDRAWAL OF BID:

A bidder may withdraw his bid before the expiration of the time during which bids may be submitted without prejudice to the bidder, by submitting a written request of withdrawal to the Thomas County Board of Commissioners, Purchasing Department.

REJECTION OF BID:

Thomas County may reject any and all bids, and must reject a bid of any party who has been delinquent or unfaithful in any formal contract with Thomas County. Also, the right is reserved to waive any irregularities or informalities in any bid in the bidding procedure. Thomas County will be the sole judge which bid is best, and in ascertaining this, will take into consideration the business integrity, financial resources, facilities for performing the work, and experience in similar operation or product of the various bidders.

STATEMENT OF EXPERIENCE AND QUALIFICATIONS:

The bidder may be required, upon request, to prove to the satisfaction of Thomas County that he/she has the skill and experience and the necessary facilities and ample financial resources to perform the contract(s) in a satisfactory manner and within the required time. If the available evidence of competency of any bidder is not satisfactory, the bid of such bidder may be rejected. The successful bidder is required to comply with and abide by all applicable federal and state laws in effect at the time the contract is awarded.

NON-COLLUSION AFFIDAVIT:

By submitting a bid, the bidder represents and warrants that such bid is genuine and not fraudulent or collusive or made in the interest or in behalf of any person not therein named, and that the bidder has not directly or indirectly induced or solicited any other bidder to put in a fraudulent bid, or any other person, firm or corporation to refrain from bidding and that the bidder has not in any manner sought by collusion to secure to that bidder any advantage over any other bidder.

INTEREST OF:

By submitting a bid, the bidder represents and warrants that neither a Commissioner nor Chairman of Thomas County has, in any manner, an interest, directly or indirectly in the bid or in the contract that may be made under it, or in any expected profits to arise therefrom.

DOCUMENTS DEEMED PART OF THE CONTRACT:

The notice, invitation to bidders, general conditions, and instructions for bidders, special conditions, specifications, bid and addenda, if any, will be deemed part of the contract.

STANDARD INSTRUCTIONS TO BIDDERS

1. The written specifications contained in this bid will not be changed or superseded except by written addendum from Thomas County. Failure to comply with the written specifications for this bid may result in disqualification by Thomas County.
2. All goods and materials will be F.O.B. Thomas County Board of Commissioners – **job site**, no freight or postage charges will be paid by Thomas County unless such charges are included in the bid price.
3. All bids must be sealed, received and in-hand at bid due date and time. Each bidder assumes the responsibility for having his/her bid received at the designated time and place without consideration, regardless of the postmark. Thomas County accepts no responsibility for mail delivery.
4. Each bid form submitted must include the name of the business, mailing address, the name, title and signature of the person submitting the bid. When submitting a bid package to Thomas County, the first page of your bid package should be the Bid Form listing price, delivery, etc., unless the bid form is requested to be in a separate sealed envelope.
5. No bids received after said time or at any place other than the time and place stated in the notice will be considered.
6. Thomas County may reject any and all bids, and must reject a bid of any party who has been delinquent or unfaithful in any formal contract with Thomas County. Also, the right is reserved to waive any irregularities or informalities in any bid in the bidding procedure. Thomas County will be the sole judge as to which bid is best, and in ascertaining this, will take into consideration the business integrity, financial resources, facilities for performing the work, and experience in similar operation of the various bidders.
7. Telephone bids will not be accepted unless stated in invitation.
8. No sales tax will be charged on any orders. Thomas County is exempt as outlined by Georgia State Law.
9. Bidders will state delivery time after receiving order.
10. Unless otherwise stated, all bids submitted will be valid and may not be withdrawn for a period of 90 days from the due date of the bid.
11. Results of the bid will be e-mailed to the bidders. Results of the bids will not be available orally.
12. All responses must be submitted on the provided bid format. Exception from this format will not be accepted. Any offeror who believes that the bid format is unclear shall submit all questions upon receipt.

Specifications

Traffic Striping for Thomas County

I. Scope: This Work shall consist of furnishing and applying reflective thermoplastic centerline, thermoplastic arrows, and thermoplastic stop bars. A single row of rpm's shall be placed on the centerline of the roadway. No sideline work will be done in this contract.

II. Materials: Materials for thermoplastic traffic stripes shall meet the requirements of the Georgia Department of Transportation for traffic line thermo and glass beads.

III. Equipment: The traveling traffic stripe painter shall be adaptable to traveling at a uniform, predetermined rate of speed both uphill and downhill in order to produce a uniform application of paint. Each nozzle shall be equipped with satisfactory cutoff valves that will automatically apply broken or skip lines. Each nozzle shall have a mechanical bead dispenser that operates simultaneously with the spray nozzle and distributes beads in a uniform pattern at the specified rate. Each nozzle shall also be equipped with suitable line guides consisting of metallic shrouds or air blasts.

Cleaning equipment shall consist of the necessary brushes, brooms, scrapers, grinders, high pressure water jets and air blasters required to satisfactorily remove all foreign matter, from the surfaces, without damage to the underlying pavement.

The traveling traffic strip painter shall also be equipped with paint meters which will indicate the amount of paint dispensed from each tank. Small, portable applicators or other special equipment may also be required.

IV. Construction:

- A. Surface Cleaning: Contractor forces shall prepare the roadways' surface prior to striping.
- B. Alignment: Traffic Stripes shall be of the length, width and placement specified. On sections where no previously applied markings are present, the contractor shall establish control points, satisfactory to the engineer, spaced at intervals that will insure accurate locations of the stripe.
- C. Application: Thermoplastic centerline shall be applied by machine except for special areas and markings that are not adaptable to machine application, in which case hand application will be permitted. No thermoplastic shall be applied to areas when:
 - 1. Any moisture or foreign matter is present on the surface
 - 2. The air temperature in the shade is below 40 degrees F
 - 3. Wind conditions are such as might cause dust to be deposited on the prepared areas or to prevent satisfactory application.

4. Painting shall be done only during daylight hours and all painted areas shall be dry enough, before sunset, to permit crossing by traffic. All protective devices shall be removed no later than sunset to allow free movement of traffic at night.
 5. Traffic Stripe thermo shall be thoroughly heated.
 6. The minimum specifications for striping shall be in accordance with the **2021 Edition of the State of Georgia Standard Specifications Construction of Transportation Systems**
 7. Immediately following the application of the thermo, a uniform application of glass beads shall be applied.
 8. A single line of raised pavement markers placed every 40' with two way reflectors, as per Thomas County specifications.
- D. **Protective Measures:** When painting is done under traffic, the Contractor shall furnish and place all warning and directional signs necessary to direct, control and protect the traffic during the striping operations. Warning signs shall be set up before the beginning of each operation and extra signs shall be kept well ahead of the painting equipment. When necessary, a pilot car shall be used to protect both the traffic and the painting operation. The freshly painted strip shall be protected by cones or other satisfactory devices. All stripes damaged by traffic, or pavement marked by traffic crossing wet paint, shall be repaired or corrected as specified in paragraph F below.
- E. **Tolerance and Appearance:** No stripe shall be less than the specified width. No stripe shall exceed the specified by more than ½ inch. The length of the 10 foot painted segment for skip stripe may vary plus or minus one foot, and the 30-foot gap between segments may vary plus or minus one foot. The alignment of the stripe shall not deviate from the intended alignment by more than one inch on tangents and on curves up to and including one degree. On curves exceeding one degree, the alignment of the stripe shall not deviate from the intended alignment by more than 2 inches.
- Continued deviation from stated dimensions will be cause for stopping the work and removing the nonconforming stripe.
- All stripes and segments of stripes shall present a clean cut, uniform and workmanlike appearance. All markings which fail to have a uniform, satisfactory appearance, either day or night, shall be corrected by the contractor at his expense.
- F. **Corrective Measures:** All work shall be subject to application rate checks for both paint and beads. All traffic stripe which fails to meet the specifications, permissible tolerances and appearance requirements, or is marred or damaged by traffic, or from other causes, shall be corrected at the

contractor's expense. All misted areas, drip and spattered thermo shall be removed to the satisfaction of the Director of Public Works. In all instances, when it is necessary to remove thermo it shall be done by means satisfactory to the Director of Public Works which will not damage the underlying surface of the pavement. When necessary to correct a deviation, which exceeds the permissible tolerance in alignment, that portion of the stripe so affected shall be removed plus an additional 25 feet in each direction, and a new strip then thermo in accordance with these specifications.

V. **Acceptance and Payment:** All sections of painted stripe, words and symbols which have dried to the extent that the paint will not be picked up or marred by the tires of vehicles, and which have been placed in reasonably close conformity with the specifications, will be accepted, and the contractor will be relieved of the responsibility of the maintenance on such sections.

A. **Measurement:** Traffic stripe, complete in place and accepted will be measured for payment by the mile or portion of a mile.

The centerline, whether single, solid, skip or double, shall be paid per mile or portion of a mile.

Single-row RPMs will be paid per mile.

B. **Payment:** Payment in each case as specified above shall be full compensation for the work and the furnishing of all material, including thermo, beads, the application, curing and protection of the thermo, the protection of the traffic including necessary warning signs; the furnishing of all tools, machines and all other equipment necessary to complete the item.

VI. **Insurance/Bonding:**

A. **EVIDENCE OF INSURANCE:** Prior to execution of the contract, the Contractor shall file, with the Owner, evidences of insurance from the insurer, certifying to the coverage of the insurance required herein. The evidences of insurance shall be certified by a properly authorized officer, agent, general agent or qualified representative of the insurer, and shall certify the names of the insured, the type and amount of insurance, the location and operations to which the insurance applies, and the expiration date. The evidences shall include the agreement of the insurer to give, by registered mail, notice to the Owner and at least 30 calendar days prior to the effective date of cancellation, lapse, or material change in the policy.

B. **CERTIFICATE OF INSURANCE:** This Certificate of Insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of the contract with the respect to which this certificate is issued, the insurance afforded by the policies described herein is subject to the terms, exclusions and conditions of such policies.

C. **CANCELLATION OF INSURANCE:** If the insurance is canceled, the Contractor shall deliver to the Owner new policies of insurance and the receipts for payment of premiums thereon. Should

the Contractor neglect to obtain and maintain in force such insurance, and deliver such policy or policies and receipts to the Owner, then it shall be lawful for the Owner to obtain and maintain such insurance. The Contractor hereby appoints the owner his true and lawful attorney, to do the things necessary for this purpose. Money expended by the Owner under the provisions of this paragraph for insurance premiums shall be charged to the Contractor. Failure of the Owner to obtain such insurance shall in no way relieve the Contractor of his responsibilities under this contract.

D. PUBLIC LIABILITY:

1. Successful bidder will be required to furnish a certificate of liability insurance in an amount not less than (\$1,000,000.00) one million dollars per occurrence to protect the county throughout the life of the contract against "all risks". Coverage to include but not be limited to general liability; comprehensive form, premises/operations, underground explosion and collapse, products/completed operations, contractual, independent contractors, broad form property damage, personal injury, and automobile liability. Worker's compensation and employer's liability are to be statutory amounts. Certificate must be furnished within (10) ten calendar days of a "notice of award" being issued.

2. Liability insurance shall indemnify the Contractor and his subcontractors against loss from liability, imposed by law, upon or assume under contract by the Contractor or his subcontractors, for damages on account of such bodily injury and property damage. The insurance shall also indemnify the Contractor and his subcontractors against losses related to completed operations and products. The insurance shall be provided by a comprehensive, broad form occurrence property damage liability policy written by licensed underwriters. The policies shall cover operations, owned and no owned vehicles and equipment, contractors' protective coverage blanket, contractual liability, and completed operations liability. The liability insurance shall not exclude explosion, collapse, underground excavation, or removal of lateral support and shall include cross liability. The Owner, the Construction Manager, the design engineer, and their officers, principals, agents, subcontractors, and employees shall be named as additionally insured on the liability policies.

3. WORKERS COMPENSATION INSURANCE:

Contractor and the subcontractors shall cover or insure under applicable laws relating to workers compensation or employer's liability insurance, their employees, working on or about the construction site, regardless of whether such coverage or insurance is mandatory or merely elective under the law. The contractor shall defend, protect, save harmless the Owner from and against claims, suits and actions arising from failure of the Contractor or the subcontractors to maintain such insurance.

4. BONDS:

a. BID BOND: Bids must be accompanied by a bid guarantee of not less than (10%) ten percent of the total amount of the bid. The guarantee may be in the form of a cashier's check, certified check, bank draft, or an irrevocable letter of credit made payable to Thomas County Commissioners, or a bid bond issued by a surety company licensed to issue such bonds in the State of Georgia. The guarantee shall insure the execution of the contract document and the furnishing of a payment bond and a performance bond. Upon the county naming a successful bidder, all other bid bonds will be returned at that time.

b. PAYMENT AND PERFORMANCE BONDS:

Thomas County will require the successful bidder to furnish a payment and performance bond, each in an amount not less than (100%) one hundred percent of the total bid amount awarded prior to being issued a "notice to proceed" under a contract issued as a result of this invitation for bid. Bonds must be submitted with (15) fifteen calendar days after being furnished a "notice of award". All bonds must be written on a surety company licensed to do business in Georgia.

c. SUBCONTRACTORS TO THE GENERAL CONTRACTOR:

In addition, any subcontractor must provide (100%) one hundred percent payment and performance bonds to the successful contractor when the value of the subcontract to the successful bidder is (\$20,000.00) twenty thousand dollars or more. A copy of the subcontractor bonds issued to the contractor must be provided to the county before the subcontractor is allowed to do any work. Upon receipt of payment and performance bonds, successful bidder's bid bond will be returned. All bonds must be written on a surety company licensed to do business in Georgia. Retainage will be held in compliance with Georgia Law.

d. RETAINAGE:

Retainage will be held in compliance with Georgia Law. Thomas County normally holds (10%) ten percent retainage throughout the entire project and will release retainage at the point of final completion and final acceptance by the County.

MAINTENANCE STRIPING

GDOT SPECIFICATIONS, as per 2021 GDOT Construction Standards:

1. 653-1506 Roadway striping thermoplastic yellow centerline (solid, double-solid, skip solid)
2. 653-1704 Thermoplastic white solid traffic stop bar, 24" – stop bars are to be placed at all intersections, including side road intersections
3. Raised pavement markers (RPMs) – a single line placed every 40', two-way reflectors, as per Thomas County specifications

COMPLETION TIME: ALL WORK MUST BE COMPLETE WITHIN 120 DAYS OF DATE OF PURCHASE ORDER ISSUE

CR #	Road name	From	To	Miles	GDOT Specification Required	Total \$ per Road
278	Hall Rd.	319 Bypass	A. Sherrod Rd.	6.19	<ul style="list-style-type: none"> • 653-1506 • 653-1704- qty. 22 • RPMs – 928 est. 	
39	Lawhorne Rd.	SR. 122	Dillion Rd.	3.38	<ul style="list-style-type: none"> • 653-1506 • 653-1704 qty. 4 • RPMs – 447 est. 	
91	Patten Coolidge Rd.	SR. 122	SR. 188	7.29	<ul style="list-style-type: none"> • 653-1506 • 653-1704 qty. 6 • RPMs – 963 est. 	
53	Lower Boston Rd.	US. 19 S.	End of Pavement	4.65	<ul style="list-style-type: none"> • 653-1506 • 653-1704 qty. 3 • RPMs – 614 est. 	
8	Parramore Fish Pond Rd.	Lower Boston Rd.	Boston Monticello Rd.	3.38	<ul style="list-style-type: none"> • 653-1506 • 653-1704 qty. 5 • RPMs – 447 est. 	
161	Maddox Rd.	Stewart Rd.	Grady County Line	7.38	<ul style="list-style-type: none"> • 653-1506 • 653-1704 qty. 7 • RPMs – 975 est. 	

TOTAL BID

33.11 miles

\$ _____

It is agreed by the undersigned bidder that the signature and submission of this bid represent the bidder's acceptance of all terms, conditions and requirements of bid specifications and, if awarded, the bid will represent the agreement between the parties.

Company Name: _____

Address: _____ City/State/Zip: _____

Contact Person: _____ Title: _____

Telephone Number: _____ Fax Number: _____ E-Mail: _____

Signed (sign manually, in ink): _____

Name Printed: _____ Title: _____ Date: _____

LOWER TIER CONTRACTOR CERTIFICATION REGARDING DEBARMENT,
SUSPENSION AND OTHER RESPONSIBILITY MATTERS

I hereby certify that I am the _____ and duly authorized representative of the firm of _____, whose address is _____, and I certify that I have read and understand the attached instructions and that to the best of my knowledge and belief the firm and its representatives:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from covered transactions by the Georgia Department of Transportation and by any Federal department or agency;
- (b) I acknowledge that this certification is provided pursuant to Executive Order 12549 and 49 DFR Part 29 and that this firm agrees to abide by the rules and conditions set forth therein for any misrepresentation that would render this certification erroneous, including termination of this agreement and other remedies available to the Georgia Department of Transportation and Federal Government.
- (c) I further acknowledge that this certificate is to be furnished to the Georgia Department of Transportation, in connection with the Prime Contractor Agreement involving participation of Federal-Aid Highway Funds, and is subject to applicable State and Federal laws, both criminal and civil.

Date _____ (seal)

CERTIFICATION OF SPONSOR

DRUG-FREE WORKPLACE

I hereby certify that I am a principle and duly authorized representative of _____ whose address is _____ and it is also that:

1. The provisions of Section 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated, relating to the “Drug-Free Workplace Act” have been complied with in full; and,
2. A drug-free workplace will be provided for the sponsor’s employees during the performance of the contract; and,
3. Each subcontractor hired by the SPONSOR shall be required to ensure that the subcontractor’s employees are provided a drug-free workplace. The SPONSOR shall secure from that subcontractor the following written certification: “As part of the subcontracting agreement with _____, _____ certifies to the subcontractor’s employees during the performance of this contract pursuant to paragraph (7) of subsection (b) of the Official Code of Georgia Annotated Section 50-24-3”; and,
4. It is certified that the undersigned will not engage in unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

Date _____

Thomas County, GA



CONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. 13-10-1991, stating affirmatively that the individual, firm, or corporation which is contracting with Thomas County has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA) P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with Thomas County, GA; contractor will secure from such contractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to Thomas County Commissioners' Office at the time the subcontractor(s) is retained to provide the service.

E-Verify User Identification Number

Legal Name of Business

BY: Authorized Officer or Agent

Project Name

Title of Authorized Office or Agent

Date

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
____ DAY OF _____ 20__

Notary Public
My Commission Expires:

*As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Rule Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in Conjunction with the Social Security Administration (SSA)

Thomas County, GA



CONTRACTOR SAVE AFFIDAVIT

STATE OF GEORGIA
_____ COUNTY

By executing this affidavit under oath, as an applicant for a _____, County Georgia contract as referenced in O.C.G.A. § 50-36-1 and the August 1, 2010. "Report of the Attorney General on Public Benefits", I am stating the following with respect to my ability to enter into a contract with _____ County.

Name: _____
(Name of natural person applying on behalf of individual, business, corporation, partnership or other private entity)

1) _____ I am a United States Citizen

OR

2) _____ I am a legal permanent resident 18 years of age or older or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20.

This ___ day of _____, 20__.

Signature of Applicant: _____

Printed Name: _____

Alien Registration number for non-citizens: * _____

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ___ DAY OF _____, 20__

Notary Public _____

My Commission Expires: _____

*Note: O.C.G.A. §50-36-1 (e) (2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

THOMAS COUNTY, GA



SUBCONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with (name of public employer) has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with Thomas County, GA; contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to Thomas County Commissioners' Office at the time the subcontractor(s) is retained to perform such service.

E-Verify User Identification Number

Authorization Date

BY: Authorized Officer or Agent
(Contractor Name) (Legal Name of Business)

Date

Title of Authorized Officer or Agent of Contractor

Job Description

Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
____ DAY OF _____, 20____

Notary Public
My Commission Expires:

* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV / Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

CERTIFICATION OF SPONSOR
DRUG-FREE WORKPLACE

I hereby certify that I am a principle and duly authorized representative of _____
(company)
whose address is _____ and it is also that:

1. The provisions of Section 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated, relating to the "Drug-Free Workplace Act" have been complied with in full; and,
2. A drug-free workplace will be provided for the sponsor's employees during the performance of the contract; and,
3. Each subcontractor hired by the SPONSOR shall be required to ensure that the subcontractor's employees are provided a drug-free workplace. The SPONSOR shall secure from that subcontractor the following written certification: "As part of the subcontracting agreement with _____, _____ certifies to the subcontractor's employees during the performance of this contract pursuant to paragraph (7) of subsection (b) of the Official Code of Georgia Annotated Section 50-24-3"; and,
4. It is certified that the undersigned will not engage in unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

Date _____

(signature)

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number								

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

LOWER TIER CONTRACTOR CERTIFICATION REGARDING DEBARMENT,
SUSPENSION AND OTHER RESPONSIBILITY MATTERS

I hereby certify that I am the _____ and duly authorized representative of the firm of _____, whose address is _____, and I certify that I have read and understand the attached instructions and that to the best of my knowledge and belief the firm and its representatives:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from covered transactions by the Georgia Department of Transportation and by any Federal department or agency;
- (b) I acknowledge that this certification is provided pursuant to Executive Order 12549 and 49 DFR Part 29 and that this firm agrees to abide by the rules and conditions set forth therein for any misrepresentation that would render this certification erroneous, including termination of this agreement and other remedies available to the Georgia Department of Transportation and Federal Government.
- (c) I further acknowledge that this certificate is to be furnished to the Georgia Department of Transportation, in connection with the Prime Contractor Agreement involving participation of Federal-Aid Highway Funds, and is subject to applicable State and Federal laws, both criminal and civil.

Date _____ (seal)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE:	NAIC #
INSURED	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPI/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N/A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE