

**APPENDIX D**

**CERTIFICATE OF COMPLIANCE WITH TAX LAWS  
FOR CONSTRUCTION CONTRACTING SERVICES  
OREGON UNIVERSITY SYSTEM**

I, the undersigned, being first duly sworn,

Check one entry     \_\_\_     hereby certify under penalty of perjury that I am not in violation of any Oregon tax laws

\_\_\_     hereby certify under penalty of perjury that I am authorized to act on behalf of Contractor and to the best of my knowledge, Contractor is not in violation of any Oregon tax laws.

Business Designation (check one):

\_\_\_ Corporation                   \_\_\_ Partnership                   \_\_\_ Sole Proprietorship  
\_\_\_ Governmental/Non-Profit                   \_\_\_ Limited Liability Company

Social Security No. or Tax Identification No. \_\_\_\_\_

(Above information must be provided prior to contract approval. If awarded the contract, this information will be reported to the Internal Revenue Service under the name and taxpayer I.D. number submitted. Information not matching IRS records could subject Contractor to 31 percent backup withholding.)

The individual signing this Master Retainer Supplement Contract warrants s/he has authority to bind \_\_\_\_\_ by his/her signature.

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

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Firm: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_