LOCAL BUSINESS ENTITY CONTINUING ELIGIBILITY AFFIDAVIT

State of __________________________
County of __________________________ ss.

BEFORE ME; the undersigned authority, in and for the said State and said County personally appeared __________________________ who, after being sworn according to law, stated that he or she was authorized to represent __________________________ and to execute this affidavit on behalf of the said Business Entity and stated, under penalty of perjury that the following statements are true, correct, accurate and complete.

Part I

1. During the preceding twelve (12) months, the Business Entity has filed a business income and receipts tax return with the City establishing that the business entity conducted business within the City within the calendar year preceding the filing of the return.

2. During the preceding eighteen (18) months the Business Entity:

   a) Has continuously maintained a valid Commercial Activity License, and all other licenses and permits necessary to conduct business with the City,

   b) Has continuously occupied, staffed, and conducted business in an office within the City, where the Business Entity’s business is conducted, and

      i. the Business Entity’s principal place of business is located in the City; or

      ii. Satisfies the requirements as defined on your current application (check all that apply):

         ☐ More than sixty percent of the Business Entity's full-time employees are reported as Philadelphia Residents on the City of Philadelphia Annual Reconciliation of Employer Wage Tax; or

         ☐ More than half of the Business Entity's fulltime employees work in the City at least sixty percent (60%) of the time; or

         ☐ More than three quarters of the Business Entity’s gross receipts are reported on the Entity’s business and income receipts tax return as Philadelphia receipts.
CITY OF PHILADELPHIA  
PROCUREMENT DEPARTMENT  
1401 JFK BOULEVARD, RM 170B  
PHILADELPHIA, PA 19102  

LOCAL BUSINESS ENTITY  
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Part II

1. Philadelphia address (including zip code) that Business Entity continuously occupies where it conducts business:

__________________________________________________________________________

2. Identify the number of full-time employees employed by Business Entity. Identify the number of full-time employees employed by Business Entity at the Philadelphia location identified above noting what percentage of Business Entity’s entire workforce this number represents:

   Total Number of Employees _______
   Number of Employees at Philadelphia location_______ and Percentage of Workforce_______%

By making this affidavit, Affiant certifies that Business Entity is not tax delinquent and waives the provisions of Section 19-506(2) of The Philadelphia Code by expressly authorizing the Revenue Department to share with the Procurement Department and its designees, the Business Entity’s Annual Reconciliation of Employer Wage Tax and business income and receipts tax return, including any information therein that would otherwise be confidential. Affiant acknowledges that all representations made herein are true and correct and acknowledges that the submission of false information is subject to revocation of LBE Certification, Debarment and the penalties of 18 Pa.C.S.A.§4903 relating to unsworn falsification to authorities.

__________________________________________________________________________

(SIGNATURE OF AFFIANT)           (DATE)

__________________________________________________________________________

(PRINTED NAME)

__________________________________________________________________________

(TITLE)

__________________________________________________________________________

(COMPANY NAME)

SWORN AND SUBSCRIBED BEFORE ME

__________________________________________________________________________

(SIGNATURE OF NOTARY PUBLIC)

THIS_________DAY OF___________, 200 .

My Commission Expires:_____________________________  NOTARY SEAL