

**Document 00 45 39 - EDGE Affidavit**

Ohio Department of Administrative Services  
General Services Division  
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**EDGE PARTICIPATION**

**Certified Statement of Intent to Contract and Perform**

**Bidder:** Submit one fully completed form for each EDGE Business Enterprise

**Project Number:** \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**A. Bidder's Company Name:** \_\_\_\_\_

**B. Certified EDGE Business Enterprise information** (for project contract at ANY tier)

**Mark all that apply:**

Bidder     Subcontractor     Material Supplier     Professional Services     Goods/Services

EDGE Business Name: \_\_\_\_\_

EDGE Business Address: \_\_\_\_\_

EDGE Business Federal Tax I.D. \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Insert a brief description of materials, supplies, labor, etc. to be provided** (may use industry codes)

\_\_\_\_\_  
\_\_\_\_\_

**C. Certification of Intent**

By signing below, Bidder certifies that it intends to contract with the certified EDGE Business Enterprise for the portion of the Contract described above related to the Contract for this Project and for the estimated cost shown below. By signing below, the certified EDGE Business Enterprise certifies that it intends to contract with the Bidder and intends to provide the portion of the Contract described above related to the Contract for this Project for the *estimated cost* of:

\_\_\_\_\_ and \_\_\_\_\_ /100 dollars ( \$ \_\_\_\_\_ ).

In the event the named Bidder is NOT the successful Bidder, this Statement shall be null and void.

***EDGE Business Enterprise***

***Bidder***

\_\_\_\_\_  
Authorized representative name, title (print or type)

\_\_\_\_\_  
Authorized representative name, title (print or type)

\_\_\_\_\_  
Signature of authorized representative

\_\_\_\_\_  
Signature of authorized representative

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