ATTACHMENT C

Contractor Certification
Wage Theft Prevention – Responsible Bidder Criteria

Prior to awarding a contract, agencies are required to determine that a bidder is a 'responsible bidder.' See RCW 39.26.160(2) & (4). Pursuant to legislative enactment in 2017, the responsible bidder criteria include a contractor certification that the contractor has not willfully violated Washington's wage laws. See Chap. 258, 2017 Laws (enacting SSB 5301).

OFM Procurement Number: RFQQ 23-900 – Vehicle Equipment Installation Services

I hereby certify, on behalf of the organization/organizations identified below, as follows (check one):

☐ **NO WAGE VIOLATIONS**. This organization and, in cases of joint proposals, the members of our coalition, has NOT been determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction to have willfully violated, as defined in RCW 49.48.082, any provision of RCW chapters 49.46, 49.48, or 49.52 within three (3) years prior to the date of the above-referenced procurement solicitation date.

OR

☐ **VIOLATIONS OF WAGE LAWS**. This organization and, in cases of joint proposals, the members of our coalition, has been determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction to have willfully violated, as defined in RCW 49.48.082, a provision of RCW chapters 49.46, 49.48, or 49.52 within three (3) years prior to the date of the above-referenced procurement solicitation date.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

ORGANIZATION NAME: _____
Name of Bidder – Print full legal entity name of organization

By: _____ _____
Signature of authorized person — Print Name of person making certifications for firm

Title: _____ Place: _____
Title of person signing certificate — Print city and state where signed

Date: _____

(Submit as single Word/pdf File – labeled as: *RFQQ 23-900 Attachment C - [Your Entity Name]*