Date: _____

CHECKLIST FOR SUBMITTING OPERATIONAL DOCUMENTS

Agency Name:

Comp	lete this checklist and submit with the operational documents required by the Se	outh Florida Workford	ce investment Board (SFW1B).
	DOCUMENT	SUBMITTED (Yes/No)	COMMENTS
*1.	Current Year State of Florida Corporate Registration Certificate		
	Or Current Year Permit/License Issued by Division of Licensing, Department of State, State of Florida		
2.	Names and Positions of Members of the Board of Directors		
3.	Corporate/Board Resolution or LLC Affidavit		
4.	W-9 Request for Taxpayer Identification Number and Certification		
5.	Proof of Required Insurances: Commercial General Liability, Professional Liability, Automobile Liability, Worker's Compensation Insurance; and Fidelity Bond Insurance.		
6.	Code of Business Ethics Affidavit		
7.	Assurances and Certifications: Certification Regarding Debarment, Suspension, and Other Matters Certification Regarding Lobbying Certification Regarding Drug-Free Workplace Requirements Non-Discrimination and Equal Opportunity Assurances Certification Regarding Public Entity Crimes Sarbanes-Oxley Act of 2002 Association of Community Organization for Reform Now (ACORN) Funding Restrictions Assurance Discriminatory Vendors Lists		
8.	Florida Clean Indoor Air Act		
9.	Contractor Disclosure and Certification		
*	NOT APPLICABLE TO GOVERNMENTAL JURISDICTIONS		
ТПА	DO NOT WRITE BELOW TH VE REVIEWED ALL REQUIRED OPERATIONAL DOCUMENTS AND FIND THI		RI E
111/1	VE REVIEWED ALL REQUIRED OF ERATIONAL DOCUMENTS AND FIND THE	EM TO BE ACCES THE)LE
	SFWIB Contracts Compliance Supervisor, OCI	Date	
	SFWIB Assistant Director, Administration	Date	
	SFWIB Contracts Administrator	Date	
	FORM F-1 CHECK LIST FOR SUBMITTING OPERA	ATIONAL DOCUME	ENTS