

**DECLARATION OF CONTRACTOR**

(To be completed by all Human Service Providers)

I am a TYPE I contractor pursuant to the Board of Supervisor’s Resolution of Contracting Principles.

TYPE I Category:

Explanation:

OR

I am a TYPE II contractor pursuant to the Board of Supervisor’s Resolution on Contracting Principles.

I currently have other County Contract for same or similar services.

Yes

No

If YES, please list each contract including the County department, type of service provided and dollar amount.

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I am authorized to complete this form on behalf of \_\_\_\_\_  
\_\_\_\_\_ [name of contracting entity]. I have used due diligence in obtaining this information and I certify that the TYPE II information submitted to the County via Internet and the information contained herein is complete and accurate to the best of my knowledge.

Contractor Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_