



## **Certification Statement Local Supplier Preference**

**The City of Smyrna has adopted a Local Supplier Preference Policy in its new Purchasing Policy Manual, effective September 2016.**

**For purposes of this Policy, "local Supplier" shall mean any business which:**

- 1) has its headquarters, distribution point or locally-owned franchise located in or having a street address within the City for at least one (1) year immediately prior to the issuance of the requested for competitive bids by the purchasing department; and
- 2) holds any required business license by a jurisdiction located in the City of Smyrna; and,
- 3) employs at least one (1) full-time or two (2) part-time employees whose primary residence is located within City of Smyrna; or if the business has no employees, it shall be at least fifty percent (50%) owned by one or more persons whose primary residence(s) is located within the City of Smyrna.

Once the Certification Statement has been received and verified, the Supplier will be added to the City of Smyrna Local Suppliers Preference Bidders list and the Supplier will receive written or email verification that the status as a Local Preferred Supplier has been approved.

Whenever the Supplier submits a quote or responds to a Request for Quotation or Proposal, the Supplier must indicate its status as a Local Preferred Supplier. Except for matters required to be bid by state law, such as public works contracts and materials, any purchase or contract of under \$100,000.00 that is put out to bid under this policy may be handled in the following manner:

When a non-local business submits the lowest bid price and the bid submitted by one or more local businesses is within five (5) percent of the price submitted by the non-local business, the local business with the lowest submitted bid shall have the opportunity match the low bid of the non-local business. If they match the low bid, they will be awarded the contract. If this local business does not desire to match the low bid, then the local business with the next lowest bid within the five (5) percent price range will be asked until all local businesses within the five (5) percent range have had the opportunity to match the lowest bid. If a local business does not desire to match the non-local business' bid, the non-local business will be awarded the contract.

Failure to note or indicate the Local Preferred Supplier Certification may result in forfeiting the Local Supplier Preference for that quote. To be given preference, the local Supplier must be current on all monies owed the City, including, but not limited to, taxes, utility bills, etc.

*Please complete the application/affidavit below to join the Local Supplier Preference program and return to Purchasing Department, 2800 King Street, Smyrna, GA 30080 or call 678-631-5406.*

**CERTIFICATION AFFIDAVIT OF ELIGIBILITY**

*I certify that my company meets all of the stated qualifications to be eligible for the City of Smyrna Local Supplier Preference. I make this certification with the full knowledge that should any information provided prove to be false, that my company could be excluded from bidding on City requirements for a period of three years.*

**Legal Company Name:** \_\_\_\_\_

**d/b/a** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Physical Address: (if different)** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Location Phone Number:** \_\_\_\_\_

**Type of Products or Services:** \_\_\_\_\_

**Commodity Code(s)** \_\_\_\_\_

**City of Smyrna Business License Number:** \_\_\_\_\_

**Year Business Established in City of Smyrna** \_\_\_\_\_

**Business Type: (corporation, partnership, sole proprietorship, franchisee, other)** \_\_\_\_\_

**Number of Employees in City location:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

**Owner's Telephone** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

*Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_*

*Notary Public for the State of \_\_\_\_\_*

*My Commission Expires: \_\_\_\_\_*

*To be completed by Authorized City of Smyrna Representative:*

**Supplier Certified:** \_\_\_\_\_  
**Authorized Signature (Purchasing or Finance)**

**Date:** \_\_\_\_\_