BUSINESS ASSURANCE STATEMENT

The undersigned certifies that he/she has read, understands and agrees to be bound by the small business provisions set forth in this Solicitation. The undersigned further certifies that he/she is legally authorized by the Bidder/Contractor to make the statements and representations in this Solicitation and that said statements and representations are true and accurate to the best of his/her knowledge and belief. The undersigned agrees to attain the small business utilization percentages of the total offer amount as set forth below:

Small Business Contract Goal Commitment = __% - <u>must match SB goal commitment on Contractor Utilization</u> <u>Plan</u>

The undersigned will enter into formal agreement(s) for work to be identified on the "Contractor Utilization Plan Form" form conditioned upon execution of a contract with METRO and agrees to include the two assurance statements below in all subcontracts. Copies of the subcontract agreements will be submitted to the Contracting Officer within <u>15</u> days of contract award and within <u>15</u> days of the addition of new subcontractors to the Contractor Utilization Plan.

The undersigned certifies that the firm shown below has not discriminated against any subcontractors because of race, color, religion, national origin, ancestry, sex, sexual orientation, gender identity, gender expression, age, marital status, genetic information, medical condition, or disability, but has provided full and equal opportunity to all potential subcontractors irrespective of race, color, religion, national origin, ancestry, sex, sexual origin, ancestry, sex, sexual orientation, gender identity, gender expression, age, marital status, genetic information, medical condition, medical condition, or disability, but has provided full and equal opportunity to all potential subcontractors irrespective of race, color, religion, national origin, ancestry, sex, sexual orientation, gender identity, gender expression, age, marital status, genetic information, medical condition, or disability.

The undersigned understands that if any of the statements and representations are made knowing them to be false or there is a failure to implement any of the stated intentions, objectives, goals, and commitments set forth herein without prior approval of METRO's President & Chief Executive Officer or duly authorized representative, the Bidder/Contractor will be subject to the loss of any contract or the termination thereof resulting from this bid and could be ineligible for future METRO contract awards.

| Signature: | |
|----------------------|------------------|
| Title: | Date of Signing: |
| Firm or Corporation: | |
| Address: | |
| Talanhana Numbari | |
| Telephone Number: | |