



City of Coral Gables  
Finance Department/Procurement Division

**Employer E-Verify Affidavit**

By executing this affidavit, the undersigned employer verifies its compliance with F.S. 448.095, stating affirmatively that the individual, firm or corporation has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in F.S. 448.095 which prohibits the employment, contracting or sub-contracting with an unauthorized alien. The undersigned employer further confirms that it has obtained all necessary affidavits from its subcontractors, if applicable, in compliance with F.S. 448.095, and that such affidavits shall be provided to the City upon request. Failure to comply with the requirements of F.S. 448.095 may result in termination of the employer's contract with the City of Coral Gables. Finally, the undersigned employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

2886980

Federal Work Authorization User Identification Number

9/25/25

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on Sept. 25, 2025 in Volusia (city), FL (state).

[Signature]  
Signature of Authorized Officer or Agent

ROBERT J. NANCE, SELF  
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME  
ON THIS THE 25<sup>th</sup> DAY OF Sept., 2025

Toni Joseph  
NOTARY PUBLIC

My Commission Expires:

10/15/2025

