



STRONGHOLD ENGINEERING INC

150 WEST WALNUT AVENUE • PERRIS, CA 92571 • 951-684-9303 • WWW.STRONGHOLDENGINEERING.COM

AFFIDAVIT OF SUPPLIER / SUBCONTRACTOR

STATE OF: _____

COUNTY OF: _____

The undersigned represents that he / she is _____ of
(Title)

_____, herein after referred to as the
(Company)

"Subcontractor" and is authorized to make this affidavit on behalf of Subcontractor. He/She knows the contents hereof and certifies that the same is true of his / her knowledge:

1. The Subcontractor of Stronghold Engineering, Inc., the Contractor, on the

(Project & Location)

in the amount of _____.
(Contract amount)

2. The undersigned certifies that the following listed firms and /or individuals will be the only parties from whom the Subcontractor will purchase material, rent equipment, or subcontract portions of Subcontractor's work on said Project, unless changes or additions are expressly consented to by Stronghold Engineering, Inc. in advance, in writing.

3. The Subcontractor agrees to notify Contractor of any change or addition in suppliers and/or subcontractors contracted after the execution of this **Affidavit of Subcontractor**. Such changes or additions are invalid without the express prior approval of Stronghold Engineering, Inc. and will constitute a breach of this subcontractor agreement.

SEE ATTACHED FOR SUPPLIER / SUBCONTRACTOR SPREADSHEET- REQUIRED.

The undersigned certifies or declares under penalty of perjury that the foregoing is true and correct.

Executed on _____ at _____
(Month / Day / Date) (City/State)

(Signature of Officer/Owner of Company)

(Print Name / Title)

ADDRESS:

AFFIDAVIT OF SUPPLIER / SUBCONTRACTOR
Required attachment form

| SUPPLIER | ADDRESS | MATERIAL | AMOUNT |
|----------|---------|----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| 2ND/3RD TIER SUBS | ADDRESS | SCOPE OF WORK | AMOUNT |
|-------------------|---------|---------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

(Signature of Officer / Owner) (Date)