

Omnibus Sworn Statement Form

[Note: The duly accomplished form shall be submitted with the Proposal]

OMNIBUS SWORN STATEMENT

I, _____ of legal age, _____, _____, and
Name of Affiant Civil Status Nationality
with residence at _____, do hereby depose and state that:
Address of Affiant

1. I am _____ or authorized representative of _____,
Name of FFCE Name of FFCE
with office address at _____;
Address of FFCE
2. As the owner and sole proprietor or authorized representative of _____ as
Name of FFCE
supported by the attached duly notarized Special Power of Attorney, I have full power and
authority to do, execute, and perform any and all acts necessary to participate, submit
proposals, and to sign and execute the ensuing contract for _____ of the

Name of Procuring Entity Project Title;
- As the authorized representative of the partnership, corporation, or cooperative, duly
registered as _____, I am granted full power and authority to do,
Name of FFCE
execute, and perform any and all acts necessary to participate, propose, and to sign and
execute the ensuing contract for _____ of the _____,
Project Title Name of FFCE
as supported by the attached duly notarized Special Power of Attorney, Board/Partnership
Resolution, or Secretary's Certificate, whichever is applicable;
3. _____ is not "blacklisted" or otherwise prohibited from submitting
Name of FFCE
proposals for the purpose of entering into government contracts by the Government of the
Philippines or any of its agencies, offices, corporations, or Local Government Units,
foreign governments, or foreign or international financing institutions whose blacklisting
rules have been recognized by the Government Procurement Policy Board; by itself or by
relation, membership, association, affiliation, or controlling interest with another blacklisted
person or entity;
4. Each of the documents submitted in satisfaction of the requirements is an authentic copy
of the original, complete, and all statements and information provided therein are true and
correct;
5. _____ is authorizing the Head of the Procuring Entity (HoPE) or
Name of FFCE
its duly authorized representative(s) to verify all the documents submitted;
6. **If sole proprietorship:** The _____ and its spouse are not related
Name of FFCE
by consanguinity or affinity up to the third civil degree to the HoPE, Procurement Agent (if
engaged), or the End-User or Implementing Unit, project consultants, head of the Project
Management Office, or the members of the Bids and Awards Committee (BAC), the
Technical Working Group, and the BAC Secretariat;
- If Partnership:** The partnership itself and the partners of _____ are not
Name of FFCE
related by consanguinity or affinity up to the third civil degree to the HoPE, Procurement
Agent (if engaged), or the End-User or Implementing Unit, project consultants, head of
the Project Management Office, or the members of the Bids and Awards Committee
(BAC), the Technical Working Group, and the BAC Secretariat;

If Cooperative: The cooperative itself and members of the board of directors, general manager, or chief executive officer of _____ are not related by consanguinity
Name of FFCE
or affinity up to the third civil degree to the HoPE (if engaged), or the End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;

If Corporation: The corporation, and officers, directors, controlling stockholders and beneficial owners of _____ are not related by consanguinity or affinity up
Name of FFCE
to the third civil degree to the HoPE, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;

7. It is understood that failure to faithfully disclose its relationship with the HoPE, members of the BAC, the TWG, and the BAC Secretariat, the head of the PMO or the end-user unit or implementing unit, and the project consultants of the Procuring Entity, or of the procurement agent by consanguinity or affinity up to the third civil degree, as well as its submission of beneficial ownership information containing false entries shall be subject to blacklisting under Section 100 of the IRR of RA No. 12009, without prejudice to criminal and civil liabilities under applicable laws, including their accessory penalties, if any.

8. **[If Corporation:]** _____ declares its beneficial ownership consistent
Name of FFCE
with its updated General Information Sheet or Beneficial Ownership Declaration Form or any other document duly submitted to the Securities and Exchange Commission (SEC) in accordance with its annual reportorial requirements.

9. _____ did not give or pay directly or indirectly, any commission, amount,
Name of FFCE
fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.

10. _____ have the necessary capacity to timely deliver the agricultural
Name of FFCE
and fishery products required under the Procurement Project, in accordance with the specifications, quality standards, and quantities determined by the Procuring Entity.

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of ___, 20__ at _____, Philippines.

Duly authorized to sign the Proposal for and behalf of:

Name of FFCE

Affiant's Signature over Printed Name
Position/Designation
Date

JURAT

SUBSCRIBED AND SWORN to before me this ____ day of *[month]* *[year]* at *[place of execution]*, Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her *[insert type of government identification card used]*, with his/her photograph and signature appearing thereon, with no. _____.

WITNESS MY HAND AND SEAL this ____ day of *[month]* *[year]*.

NAME OF NOTARY PUBLIC

Notarial Commission No. _____

Notary Public for _____ until _____

Roll of Attorneys No. _____

PTR No. __, *[date issued]*, *[place issued]*

IBP No. __, *[date issued]*, *[place issued]*

Doc. No. _____

Page No. _____

Book No. _____

Series of _____.