**Attachment 10 - MANUFACTURER’S CERTIFICATE**

|  |  |
| --- | --- |
| CONTRACT PERIOD: | November 1, 2019 to October 31, 2024With option to extend for up to one (1) additional year |
| Only Manufacturers or their Dealers/Distributors are qualified to participate in this Solicitation. |
| INSTRUCTIONS: This "Manufacturer’s Certificate" is to be forwarded by the Bidder to its proposed Manufacturer for completion and returned to the Bidder for inclusion with its Bid (See Section 4.12 – *MANUFACTURER’S CERTIFICATION*). This form is required if the Bidder is a Dealer/Distributor and not the Manufacturer. |

|  |
| --- |
| DEALER/DISTRIBUTOR INFORMATION |
| BIDDER’S COMPANY NAME |  |
| BIDDER’S FIN |  |
| STREET ADDRESS |  |
| CITY, STATE ZIP |  |

|  |
| --- |
| MANUFACTURER’S ATTESTATION |
| The Manufacturer executing this certificate by signature below does hereby attest to the accuracy and validity of the responses to the following questions: |
| 1. Is the Bidder listed above a Dealer or Distributor authorized to sell your products?
 | Dealer [ ]  | Distributor [ ]  |
| 2. Do you, as a Manufacturer, agree to supply the Bidder with all quantities of items ordered pursuant to any resulting Contract with New York State for the duration of the Contract term? | Yes [ ]  | No [ ]  |
| MANUFACTURER’S COMPANY NAME |  |
| MANUFACTURER’S FEIN |  |
| STREET ADDRESS |  |
| CITY, STATE ZIP |  |
| SIGNATURE OF AUTHORIZED MANUFACTURER’S REPRESENTATIVE |  |
| PRINTED NAME OF SIGNATORY |  |
| TITLE |  |
| DATE SIGNED |  |
| TELEPHONE NUMBER |  |
| EMAIL ADDRESS |  |