OMNIBUS SWORN STATEMENT

AFFIDAVIT

	me of Affiant], of legal age, [Civil Status], after having been duly sworn in accordance	
1.	I am the with	office address at [address of Bidder];
2.	As <u>[Capacity]</u> power and authority to do, execute and prepresent it in the bidding <u>Project]</u> ;	perform any and all acts necessary to
3.	[Name of Bidder] is not "blacklisted" or barred from bidding by the Government of any country or any of its agencies, offices, corporations, or foreign government/foreign or international financing institution;	
4.	Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;	
5.	[Name of Bidder] is authorizing the Philippine Department of Tourism-Bids and Awards Committee or its duly authorized representative(s) to verify all the documents submitted;	
6.	[Name of Bidder] is aware of and has undertaken the following responsibilities as a Bidder:	
	a) Carefully examined all of the Biddi	ing Documents;
	b) Acknowledged all conditions, locimplementation of the Contract;	cal or otherwise, affecting the
	c) Made an estimate of the facilities a the Terms of Reference needed for and	

d) Inquired or secured Supplemental/Bid Bulletin(s) issued by the Philippine Department of Tourism for this bidding, if any.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand/s this _____ day of [month] [year] at [place of execution].

[Insert NAME OF BIDDER'S AUTHORIZED REPRESENTATIVE] [Insert signatory's legal capacity] Affiant

SUBSCRIBED AND SWORN to before me this day of [month] [year] at [place of execution], Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity. Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no and his/her Community Tax Certificate No issued on at			
Witness my hand and seal this day of [month] [year].			
S N R P	NAME OF NOTARY PUBLIC Serial No. of Commission Notary Public for until Roll of Attorneys No PTR No, [date issued], [place issued] BP No, [date issued], [place issued]		
Doc. No Page No Book No Series of			