



**FEED NJ**  
**Contractor Eligibility Verification Form**

**EXHIBIT 2-2**

(For use by Prime Contractor and all Subcontractors)

<b>Applicant Information</b>		
1.	Applicant Organization	
2.	Facility Name	
3.	Facility Location	
4.	County	
<b>Contractor Information</b>		
5.	Contractor Legal Business Name	
6.	SAM.GOV Unique Entity ID (required: full registration – viewable by the public)	
7.	Address	
8.	City	
9.	State	
10.	Zip Code	
11.	Contractor Phone Number	
12.	Enter the name of each principal below	Enter the title of each principal
13.		
14.		
15.		
<i>Please do not write under this line. Box 16 is for NJEDA use only.</i>		
16.	Contractor's eligibility performed by	(Print)
		(Sign)
		(Date)

**Instructions: Contractor Eligibility Verification Form (Exhibit 2-2)**

***Please note: Verifications must be obtained prior to award of contract***

1–3. Applicant/Facility Identification	Name of grant applicant, applicant organization name and the name and address of the facility improvement location
4. County	County where facility improvement work will take place
5–11. Contractor Identification	The legal name and contact information of the contracting firm.
12–15. Identification and titles of firm Principals	Since the names are checked against a federal database of debarred names, list complete legal names if possible. In the case of corporations, “Principals” are owners or office holders as recorded legally. In sole proprietorships or partnerships, “Principals” are the owner(s). Title can include President, Vice President, Secretary, etc.
16. Identification of NJEDA staff performing contractor eligibility verification	The name and signature of the NJEDA staff who verifies the contractor’s eligibility and date the verification was performed