INDIVIDUAL TYPE BUSINESS CERTIFICATION

I, _____ _, in my personal capacity, of legal age, _____
(first and last name) (marital status)
, _____, and a resident of _____, _____,
(profession) (town) (country or state)

CERTIFY THE FOLLOWING:

1. That my name and other personal circumstances are as stated above.
2. That I appear as a sole proprietor of an individual type of business.
3. That the trade name of my business (D/B/A, if applicable), is as follows, _____.
4. That the purpose of the sole proprietorship I represent is to provide the following goods, works and/or professional or non-professional services: (write what you are engaged in)

_____
_____
_____.

5. That the following persons, whose signatures appear on this document below, are authorized on behalf of and in representation of the business, to sign the bids submitted as part of the processes for the purchase of goods and professional and non-professional services carried out by the different agencies, public corporations, and municipalities of the Government of Puerto Rico.
6. That the signatures of the persons appearing herein bind the business that I represent in all the processes of purchase of goods and professional or nonprofessional services carried out by the agencies of the Executive Branch of the Government of Puerto Rico, public corporations, and municipalities. Likewise, said persons are authorized to sign bids and subscribe any type of document required as part of said appearance.

Name and Last Name	Position	Signature

7. That I sign this Certification for the purpose of complying with one of the requirements to enter the Bidders Sole Registry (RUL) or the Professional Service Providers Sole Registry (RUP) and for any other pertinent administrative or legal purpose.

AND FOR THE RECORD, I sign this certification at _____,
(city)
_____, today_____ of _____ of 20_____.
(country or state)

_____
Signature