

**STATE OF NORTH CAROLINA  
COUNTY OF BRUNSWICK**

**STANDARD ASSURANCES BY COUNTY ASSISTED  
AGENCIES AND/OR ORGANIZATIONS**

**I. PURPOSE**

- A. For each fiscal year, any “non-departmental” (non-direct or “outside”) agency or organization requesting County assistance funds must submit an original signed copy of this document with their budget package request.
- B. These assurances shall act to hold the County of Brunswick harmless from any liability that the agency or organization may incur.

**II. ASSURANCES AFFIDAVIT**

The authorized official of the agency or organization given below assures the County of Brunswick that:

- A. The agency/organization is a legal entity under Federal and State laws and is authorized to provide services being proposed for financial assistance from the County.
- B. The agency/organization has the legal authority and the institutional, managerial, and financial capacity to insure the proper planning, management and completion of the project(s) proposed for County financial assistance.
- C. The agency/organization will establish safeguards to forestall the appearance of or actual conflicts of interest or personal gain.
- D. The agency/organization will comply with all Federal and State laws and regulations related to illegal discrimination.
- E. The agency/organization will comply with Federal and State laws and regulations related to Workplace Drug Abuse and Treatment, workplace health and safety, workers compensation, and other applicable workplace requirements.
- F. The agency/organization will comply with Federal and State laws and regulations related to the Fair Labor Standards Act, Hatch Act, taxes and other personnel requirements.
- G. The agency/organization will comply with applicable program/project services standards, contracts and regulations for any program/project services assisted by the County.
- H. The agency/organization will comply with Federal and State laws and regulations related to financial and compliance audits and will submit a copy of each audit report to the County Manager within 60 days after issued.
- I. The agency/organization will hold the County of Brunswick harmless from any claim or liability that may arise or result from the operation of any program/project service(s) assisted by the County of Brunswick.

- J. The agency/organization will submit promptly to the County Manager any information requested related to any program/project services assisted by the County.
- K. The agency/organization will comply with any County ordinance or policy applicable to any program/project service assisted by the County.
- L. The agency/organization will comply with the formal and informal bid requirements set forth in the County's Contract and Purchasing Policy when performing construction or repair work, or when purchasing (including lease purchasing) apparatus, supplies, materials or equipment and involving any County funds except that municipal departments shall follow their respective municipal purchasing policy consistent with North Carolina General Statutes.
- M. All County funding shall be utilized strictly for the operation, maintenance and capital needs of each agency/organization. Any item acquired using County funds by agency/organization shall become property of that agency/organization (and titled to that agency/organization when applicable). In the event an agency/organization decides to dispose of property acquired with any County funds, then other agencies/organizations will be given first opportunity to acquire the surplus property. In any event, proceeds obtained from sale of surplus property acquired with any County funds shall be used only for the same purpose as County funds.
- N. The agency/organization will submit a semiannual report (on or about January 15<sup>th</sup> and July 15<sup>th</sup>) of its uses of County funding and the tangible benefits of the funded activities to County residents.

**Certification**

The above assurances will be complied with for the financial fiscal year starting on July 1, 2010 and ending June 30, 2011.

Agency/Organization \_\_\_\_\_

Box/Street/Route \_\_\_\_\_

Town/State/Zip \_\_\_\_\_

Federal Tax ID Number \_\_\_\_\_

By (Signature) \_\_\_\_\_

Typed Name \_\_\_\_\_

Title \_\_\_\_\_

Date Submitted \_\_\_\_\_