



COUNTY EMPLOYEES WISHING to REGISTER as COUNTY PROCUREMENT VENDORS or PHCD EMERGENCY RENTAL ASSISTANCE PROGRAM LANDLORD VENDORS (ERAP)

Please submit the following information by mail, fax, or email to:

The Commission on Ethics & Public Trust
Overtown Transit Village North
701 Northwest 1st Court 8th Floor
Miami, FL 33130

Phone: (305) 579-2594
Fax: (305) 579-0273
Email: ethics@miamidade.gov

Employee's Name

Employee's Dept.

Check one:

PROCUREMENT- County Vendor: Business name and type _____

HOUSING DEPARTMENT (PHCD)- Landlord Vendor (Emergency Rental Assistance Program)

Employee's Mailing Address

Employee's Daytime Phone

Employee's Preferred Email

Immediate Family

Members

(Please list the names, titles, and departments of any immediate family members currently employed by Miami-Dade County)

The Miami-Dade County Conflict of Interest & Code of Ethics at §2-11.1(c)(2) allows County employees to contract with the County in certain circumstances and if the following criteria are met. Please confirm that you will be able to meet all of these criteria:

1. Entering into a contract with the County will not interfere with the full and faithful discharge of my duties to the County.
2. I will not participate in determining the contract requirements.
3. I will not participate in awarding the contract.
4. My job responsibilities and job description will not require me to be involved in the contract in any way including, but not limited to, its enforcement, oversight, administration, amendment, extension, termination, or forbearance.
5. I will not be working in the County department that enforces, oversees, or administers the contract.

I have read these requirements and pledge to abide by them.

Signature

Date