COVID-19 Contractor Vaccination and Booster Requirement Declaration

This declaration is required for all suppliers, vendors and other contractors working on-site at any Washington State Office of the Attorney General location as of April 1, 2022. Signed Declarations can be emailed to contractnotice@atg.wa.gov or contracts@atg.wa.gov.

Pursuant to Governor Inslee's Proclamation 21-14 COVID-19 Vaccination Requirement ("Proclamation") (https://www.governor.wa.gov/office-governor/official-actions/proclamations), as amended, and Washington State Office of the Attorney General Policy and any safety requirements (https://www.atg.wa.gov/contracts), I hereby agree to the below terms and declare as follows:

1. I am an authorized representative of ____________________________ or an owner/sole proprietor, hereafter referred to as “Contractor” throughout this Declaration.

2. Contractor has one or more contracts with the Washington State Office of the Attorney General ("AGO") subject to this Declaration.

3. Contractor fully acknowledges, understands, and will comply with its continuing obligation under the Governor’s Proclamation 21-14, as amended, and Washington State Office of the Attorney General Policy and any safety requirements to verify that every employee and subcontractor of Contractor, before engaging in on-site work at any AGO location, is fully vaccinated against COVID-19, as defined in Proclamation 21-14, as amended, and is in compliance with any legal requirement or AGO Policy requiring booster dose(s) of a COVID-19 vaccine.

4. The AGO has elected to require Contractor to assume responsibility for the vaccination and booster verification and accommodation requirements and Contractor acknowledges its assumption of responsibilities with respect to all of its employees and subcontractors that provide on-site services to the AGO.

Contractor Declaration Status

Check all boxes that apply (owner/sole proprietor section is below):

☐ Contractor certifies it has met all of the vaccine verification and accommodation requirements included within the Proclamation and AGO Policy and any safety requirements. This includes the requirement to obtain a copy or visually observe proof
of full vaccination against COVID-19 and the receipt of any booster dose(s) of a COVID-19 vaccine required by any legal requirement or AGO policy.

☐ Contractor certifies it is not providing goods and/or services on-site, whether itself or through any employees or subcontractors, at any AGO facility and is thus exempt from the Proclamation and AGO Policy and safety requirements.

If you are an owner/sole proprietor, check all boxes that apply:

☐ As an owner/sole proprietor, I hereby certify that pursuant to the Proclamation and AGO Policy and safety requirements I am fully vaccinated against COVID-19 and received any booster dose(s) of a COVID-19 vaccine required by any legal requirement or AGO Policy. (Note: The AGO may require you to provide proof of full vaccination and booster dose.)

☐ As an owner/sole proprietor, I hereby certify that I am unable to get vaccinated against COVID-19 because of a disability, as defined in the Americans with Disabilities Act of 1990, the Rehabilitation Act of 1973, or the Washington Law Against Discrimination, as applicable. I further certify that an appropriate health care or rehabilitation professional has determined and documented that I have a disability that necessitates an accommodation. If the need for an accommodation is temporary, please provide the end date of said need here: ____________.

☐ As an owner/sole proprietor, I hereby certify that I am unable to get vaccinated against COVID-19 because doing so would conflict with my sincerely held religious beliefs, practice, or observance. I further certify that my inability to get vaccinated is not merely based on personal preference.

☐ As an owner/sole proprietor, I hereby certify that I am not providing and will not provide goods and/or services on-site at any AGO facility and am thus exempt from the Proclamation and AGO policy and requirements.

5. Contractor agrees to immediately notify the AGO if any statement attested to in this Declaration is no longer truthful or accurate.

6. Contractor agrees to submit additional signed declarations upon the request of and by the date designated by the AGO or if statement attested to in a prior declaration is no longer truthful or accurate. The Declaration form can be found here (https://www.atg.wa.gov/contracts).

7. Contractor has procedures in place to ensure that any contract activities that occur on-site at an AGO facility are performed by personnel who are fully vaccinated and boosted in accordance with applicable legal requirements or AGO Policy or properly exempted and accommodated.

8. Contractor has not provided any accommodation:
   a. That Contractor knows is based on false, misleading, or dishonest grounds or information;
   b. That Contractor knows is based on the personal preference of the individual and not on an inability to get vaccinated because of a disability or a conflict with a sincerely held religious belief, practice, or observance; or
   c. Without Contractor conducting an individualized assessment and determination of
each individual’s need and justification for an accommodation; i.e., “rubberstamping” accommodation requests.

9. Contractor will require any individual who receives an accommodation to take COVID-19 safety measures that are consistent with the recommendations of the state Department of Health and the Department of Labor & Industries for the setting in which the individual works.

10. Contractor agrees that it and its employees and subcontractors will comply with additional safety requirements as posted at AGO facilities when on-site, such as taking and passing a health screen before entering, social distancing, submitting proof of a negative COVID-19 test, or wearing a face covering.

11. Contractor further agrees to cooperate with any investigation or inquiry the AGO makes into the Contractor's compliance with the Proclamation and AGO Policy and safety requirements. This includes providing information and records upon request, except any information or records that the Contractor is prohibited by law from disclosing.

I agree to the above terms and declare under penalty of perjury under the law of Washington that the foregoing is true and correct, and that I will notify the Office of the Attorney General of any future changes in any statement herein.

Signed on the ____ day of ____________, 20__, at ___________________.

[day] [month] [year] [city, state]

Printed Name:

Signature:

If Company, Printed Company Name: