



15093 LANDFILL DRIVE  
SUMMERDALE, AL 36580  
T (251) 972-6878  
F (251) 580-2582

To: VENDORS, CONTRACTORS, AND GRANTEES  
From: Terri Graham, Director  
Date: August 1, 2023  
Re: H.B. 56- Alabama Immigration Law Compliance

Solid Waste Disposal Authority of Baldwin County Alabama, Inc. (SWDA) is required to comply with the provisions of the new Alabama Immigration Law (the Act). Compliance requirements for SWDA become effective October 1, 2023. The requirements flow down to all contractors, vendors, and grantees doing business with the Solid Waste Disposal Authority and employing one or more employees in Alabama. If you wish to become a new vendor of the SWDA or if you wish to continue to do business with the SWDA or receive funds from the SWDA, you must complete and submit the following:

**If your organization/entity does NOT employ one or more employees in the State of Alabama, you must submit the following:**

1. Submit an updated W-9 Form (form attached)
2. Affidavit of Immigration Law Compliance (complete **PART I**- copy attached)

**If your organization/entity DOES employ one or more employees in the State of Alabama, you must submit the following:**

1. Submit an updated W-9 Form (form attached)
2. Affidavit of Immigration Law Compliance (complete **PART II**, sign and have notarized) (copy attached)
3. Submit to the SWDA an E-Verify Memorandum of Understanding. **If required to comply, you must go to the following website to enroll in E-Verify which is a federal program that verifies the employment eligibility of all newly hired employees.** ([http:// www.uscis.gov/portal/ site/ uscis](http://www.uscis.gov/portal/site/uscis)) Go to the E-Verify Home page to initiate enrollment. Once you go through the steps to enroll, the program will print the *requested E- Verify Memorandum of Understanding*. This is the document, a copy of which you must submit along with the Affidavit attached to this memo.
4. Execute and submit to the SWDA the attached Alabama Immigration Law Compliance Law Contract in the attached "Notice " form provided.

If you have subcontractors, provide your subcontractors notice of their compliance obligations and OBTAIN from each a notarized *Affidavit of Immigration Law Compliance-SUBCONTRACTOR*. (SAMPLE COPY ATTACHED) You may provide copies of this memo to your subcontractors as a explanation of this mandatory requirement. You are not required to submit the subcontractor affidavits; just maintain on file. A customizable version of this Affidavit is also available at [http:// www.uscis.gov](http://www.uscis.gov).

These requirements imposed by the new Law are a condition for doing business with the Solid Waste Disposal Authority and receiving any funds from the Solid Waste Disposal Authority. Maintain ALL documents for audit purposes.

**If you do NOT employ one or more employees in the State of Alabama, submit an updated W-9 and complete PART I of the attached Affidavit. If you DO employee one or more employees in the State of Alabama, please submit the four documents identified. Please submit the requested documentation to the SWDA address below.**

**Solid Waste Disposal Authority of Baldwin County Alabama, Inc.**

**Attn: Accounts Payable**

**15093 Landfill Drive**

**Summerdale, AL 36580**

We regret any inconvenience or burden that these new requirements place on you and your business or organization. If you wish to do business with the Solid Waste Disposal Authority, you must comply and submit the requested documents. If we can assist in any way, please contact us at 251-972-6878.

Thank you for your patience and cooperation regarding this matter.

## AFFADAVIT OF ALABAMA IMMIGRATION COMPLIANCE

In the compliance with Sections 31-13-9 (a) and (b) of the Alabama Code, this Affidavit of Alabama Immigration Compliance must be completed and signed by an officer or owner of a contractor or grantee and notarized, as a condition for the award of any contract by **Solid Waste Disposal Authority of Baldwin County Alabama, Inc.** to an employer that employs one or more employees in the State of Alabama and is a recipient of funds from the State of Alabama, or funds from any political subdivision of the State of Alabama, or any public funded entity. Please complete Part I (if you do NOT employ one or more employees in the State of Alabama) or Part II (if you DO employ one or more employees in the State of Alabama). **The PART II Affidavit must be notarized.**

### PART I- Complete if you do NOT employ one or more employees in the State of Alabama

State of \_\_\_\_\_

County of \_\_\_\_\_

I certify in my capacity as \_\_\_\_\_ (your position) for \_\_\_\_\_ (name of contractor or grantee) that Contractor or Grantee does not employ one or more employees in the State of Alabama. I further certify that should my status change and I am required to comply that I will submit all required documents to the SWDA. I have read this Affidavit and swear and affirm that it is true and correct.

\_\_\_\_\_  
Signature of Affiant

### PART II- Complete if you DO employ one or more employees in the State of Alabama

State of \_\_\_\_\_

County of \_\_\_\_\_

Before me, a notary public, personally appeared \_\_\_\_\_ (print name) who, is duly authorized by the business entity/employer which appears below, being sworn, says as follows:

As a condition for being a contractor or grantee on a project paid for by contract, grant, or incentive by the State of Alabama, or any political subdivision thereof, or any state-funded entity, I hereby attest that in my capacity as

\_\_\_\_\_ (your position) for \_\_\_\_\_ (name of contractor or

grantee), said Contractor or Grantee does not knowingly employ, hire for employment, or continue to employ an unauthorized alien. Further, Contractor or Grantee affirms that it is providing notice to its subcontractors of their Alabama Immigration Compliance obligations. I further attest that said Contractor or Grantee is enrolled in the E- Verify program and attached to this Affidavit is our E-Verify Memorandum of Understanding confirming such program enrollment. I have read this Affidavit and swear and affirm that it is true and correct.

\_\_\_\_\_  
Signature of Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 2\_\_\_\_. I certify that the affiant is known (or made known) to me to be the identical party he or she claims to be.

\_\_\_\_\_  
Signature and Seal of Notary Public

Please execute and return to the **Solid Waste Disposal Authority of Baldwin County Alabama, Inc.**



15093 LANDFILL DRIVE  
SUMMERDALE, AL 36580  
T (251) 972-6878  
F (251) 580-2582

**Notice of Alabama Immigration Law Compliance Requirements to all Contractors of the SOLID WASTE DISPOSAL AUTHORITY OF BALDWIN COUNTY ALABAMA, INC.**

As a Contractor, as defined in the Act, to the SOLID WASTE DISPOSAL AUTHORITY (SWDA), it is critical to your relationship (future or continuing) with the SWDA that you comply with the Immigration Reform and Control Act of 1986, as amended by the Immigration Act of 1990, and the Beason-Hammon Alabama Taxpayer and Citizen Protection Act. Accordingly, please provide your Affidavit and Immigration Compliance with attached E-Verify Memorandum of Understanding, as requested in the attached memorandum. If you do not believe these obligations apply to you, please notify the SWDA immediately.

Every contract entered into by the Solid Waste Disposal Authority (SWDA) from this point forward with a contractor will contain the following clause or one substantially similar:

**Alabama Immigration Law Compliance Contract:** Contractor agrees that it will fully comply with the Immigration Reform and Control Act of 1986, as amended by the Immigration Act of 1990, and the Beason-Hammon Alabama Taxpayer and Citizen Protection Act, which makes it unlawful for an employer in Alabama to *knowingly* hire or continue to employ an alien who is or has become unauthorized with respect to such employment or to fail to comply with the 1-9 requirements or fails to use E-Verify to verify the eligibility to legally work in the United States for all of its new hires who are employed to work in the State of Alabama. Without limiting the foregoing, Contractor shall not knowingly employ, hire for employment, or continue to employ an unauthorized alien, and shall have an officer or other managerial employee who is personally familiar with the Contractor's hiring practices to execute an affidavit to this effect on the form supplied by the SWDA and return the same to the SWDA. Contractor shall also enroll in the E-Verify Program prior to performing any work, or continuing to perform any ongoing work, and shall remain enrolled throughout the entire course of its performance hereunder and shall attach to its Affidavit the E-Verify Program for Employment Verification Memorandum of Understanding and such other documentation as the SWDA may require to confirm Contractor's enrollment in the E-Verify Program. Contractor agrees not to knowingly allow any of its subcontractors, or any other party with whom it has a contract, to employ in the State of Alabama any illegal or undocumented aliens to perform any work in connection with the Project, and shall include in all of its contracts a provision substantially similar to this paragraph. If Contractor receives *actual knowledge* of the unauthorized status of one of its employees in the State of Alabama, it will remove that employee from the project, jobsite, or premises of the SWDA on and shall comply with the Immigration Reform and Control Act of 1986, as amended by the Immigration Act of 1990, and the Beason-Hammon Alabama Taxpayer and Citizen Protection Act. Contractor shall require each of its subcontractors, or other parties with whom it has a contract, to act in a similar fashion. If Contractor violates any term of this provision, this Agreement will be subject to immediate termination by the SWDA. To the fullest extent permitted by law, Contractor shall defend, indemnify, and hold harmless the SWDA from any and all losses, consequential damages, expenses (including, but not limited

to attorney's fees, claims, suits, liabilities, fines, and any other costs arising out of or in any way related to Contractor's failure to fulfill its obligations contained in this paragraph).

To the extent that there is no formal written contract between the SWDA and the Contractor, such as where business is conducted by purchase order, this document shall serve as the Alabama Immigration Compliance Contract.

**Alabama Immigration Law Compliance Contract Notice Acknowledged and Agreed by Contractor whose name appears below:**

Contractor Officer or Owner Signature

Date

---

Print Name/Title/ Company

Please execute and return to **Solid Waste Disposal Authority of Baldwin County Alabama, Inc.**

*(This is only to be completed for any SUBCONTRACTORS and maintained on file, NOT REQUIRED TO BE SUBMITTED.)*

**AFFIDAVIT OF ALABAMA IMMIGRATION COMPLIANCE BY A  
POLITICAL SUBDIVISION OF THE STATE OF ALABAMA**

In compliance with SECTIONS 9 (a) and (b) BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (the Act); CODE OF ALABAMA, SECTIONS 31-13-9 (a) AND (b), this Affidavit of Alabama Immigration Compliance is to be completed is to be completed and signed by an officer or owner of a subcontractor and notarized, as a condition for the award of any contract by Solid Waste Disposal Authority of Baldwin County Alabama, Inc. (SWDA) or by the State of Alabama to a Contractor that employs one or more employees in the State of Alabama and is a recipient of funds from the State of Alabama or funds from any political subdivision of the State of Alabama, or any public funded entity. Subcontractors are to provide notice to their Subcontractors of their Alabama Immigration Compliance obligations.

**State of Alabama**

**County of** \_\_\_\_\_

Before me, a notary public, personally appeared \_\_\_\_\_ **(print name)** who, is duly authorized by the business entity/employer which appears below, being sworn, says as follows:

As a condition for being a subcontractor to a contractor or grantee, on a project paid for by contract, grant, or incentive by the State of Alabama, or any political subdivision thereof, or any state-funded entity, I hereby attest that in my capacity as \_\_\_\_\_ **(your position)** for \_\_\_\_\_ **(name of subcontractor)**, said subcontractor does not knowingly employ, hire for employment, or continue to employ an unauthorized alien. Further, subcontractor affirms that it is providing notice to its subcontractors of their Alabama Immigration Compliance obligations. I further attest that said subcontractor is enrolled in the E-Verify program and attached to this Affidavit is our E-Verify Memorandum of Understanding confirming such program enrollment. Further, as a direct subcontractor, for those current employees for whom the E-Verify system may not be used in accordance with applicable federal rules and regulations, subcontractor has reviewed, or had reviewed, the Form I-9's for each of its current employees and has a good faith and belief that it has complied with ALA. CODE 31-13-9 (c) and (d).

I have read this Affidavit and swear and affirm that it is true and correct.

\_\_\_\_\_  
Signature of Affiant

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_. I certify that the affiant is known (or made known) to me to be the identical party he or she claims to be.

\_\_\_\_\_  
Signature of Seal and Notary Public

To be returned to the Contractor or Grantee of Solid Waste Disposal Authority of Baldwin County Alabama, Inc.  
**(NOT REQUIRED TO BE SUBMITTED TO THE SWDA)**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your return). Name is required on this line blank.	
2 Business name/disregarded entity name, if different from above	
<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC         <input type="checkbox"/> C Corporation         <input type="checkbox"/> S Corporation         <input type="checkbox"/> Partnership         <input type="checkbox"/> Trust/estate       </p> <p> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) <b>▶</b> _____       </p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p> <input type="checkbox"/> Other (see instructions) <b>▶</b> _____       </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><i>(Applies to accounts maintained outside the U.S.)</i></p>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

<b>Part I</b>	<b>Taxpayer Identification Number (TIN)</b>
---------------	---

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

or

Employer identification number

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	Date
------------------	--------------------------	------

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



15093 LANDFILL DRIVE  
SUMMERDALE, AL 36580  
T (251) 972-6878  
F (251) 580-2582

IN ORDER FOR THE SOLID WASTE DISPOSAL AUTHORITY OF BALDWIN COUNTY, ALABAMA, INC. TO SET YOUR COMPANY UP IN OUR DATABASE AS A VENDOR, PLEASE COMPLETE THE FOLLOWING INFORMATION AS WELL AS THE ATTACHED W-9 FORM AND EMAIL TO THE [AP@BALDWINCOUNTYSWDA.ORG](mailto:AP@BALDWINCOUNTYSWDA.ORG).

COMPANY NAME \_\_\_\_\_

MAILING ADDRESS FOR PURCHASE ORDERS

\_\_\_\_\_

\_\_\_\_\_ COUNTY \_\_\_\_\_

REMITTANCE ADDRESS FOR PAYMENT

\_\_\_\_\_

\_\_\_\_\_ COUNTY \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

CONTACT NAME/SALES REPRESENTATIVE

\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

COMMENTS \_\_\_\_\_

\_\_\_\_\_

CHECK ONE OF THE FOLLOWING TO WHICH YOU BELONG:

NATIONAL \_\_\_\_\_

STATE \_\_\_\_\_

COOPERATIVES \_\_\_\_\_

NOTES \_\_\_\_\_

**SOLID WASTE DISPOSAL AUTHORITY  
OF BALDWIN COUNTY, ALABAMA, INC.  
15093 LANDFILL DRIVE, SUMMERDALE, AL 36580  
AMANDA CUNNINGHAM (251) 972-6878 EXT. 8540**

CHECK ONE & LIST THE CONTRACT NUMBER:

SAPA \_\_\_\_\_

SOURCEWELL \_\_\_\_\_

TIPS \_\_\_\_\_

OMNIA \_\_\_\_\_

HGAC BUY \_\_\_\_\_

ST OF ALABAMA \_\_\_\_\_