

**AFFIDAVIT OF DISCLOSURE OF INDEBTEDNESS
TO THE CITY OF CHICAGO**



The undersigned entity/individual understands that failure to disclose any debt owed to the City, including parking tickets, will be grounds for the termination of any offer to do business with the City of Chicago.

Print Full Name: _____

Print Home Address: _____

City, State, Zip: _____

Home Telephone: _____

Social Security No.: _____

Drivers License No.: _____

Signature: _____

1) List all prior address(es) for the last five years.

Prior Address: _____

Prior Address: _____

City, State, Zip Code: _____

City, State, Zip Code: _____

Prior Address: _____

Prior Address: _____

City, State, Zip: _____

City, State, Zip Code: _____

2) List all plate numbers for the last five (5) years on vehicles for which you/your entity are listed as owner, co-owner, or co-signer.

Plate Number: _____

Plate Number: _____

Plate Number: _____

Plate Number: _____

Plate Number: _____

Plate Number: _____

Plate Number: _____

Plate Number: _____

3) For the last five (5) years, if you have been an owner, officer, director, associate, partner, or proprietor of a business, list that information below:

Business Name	Address (Include City, State, Zip)	Type of Company
_____	_____	_____
_____	_____	_____