According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0572–0107. The time required to complete this information collection is estimated to average .5 of an hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

## U.S. Department of Agriculture Rural Utilities Service

## CERTIFICATE OF CONTRACTOR AND INDEMNITY AGREEMENT

	, certifies that
he is the 1	
TITLE O	R DESIGNATION
of	, the Contractor in
NAME OF CONTRA	ACTOR
a Contract dated	, 20 , entered into between the Contractor
and	the Owner, for the
andNAME OF RUS BOR	RROWER
construction of a rural telephone Project (hereina	fter referred to as Project), which bears the Rural
Utilities Service Project Designation	RUS DESIGNATION and that he is authorized
to and does make this Certificate and Indemnity A induce the Owner to make payment to the Contract contract and to induce the Rural Utilities Service a performed pursuant to the contract.	
Undersigned further says that all persons	who have furnished labor in connection with of the
Project represented by the Final Invoice dated	have been paid
in full; that all manufacturers, materialmen and si	ubcontractors which furnished any materials or service, l, that no lien has been filed against the Project and no
Project the Contractor will indemnify and hold ha indemnify and hold harmless the Owner from any	er pays the Contractor the contract price for the said ermless and does hereby undertake and agree to claim or lien arising out of the negligence or other fault f the contract which may have been or may be filed
	SIGNATURE OF CONTRACTOR

Expires: XX/XX/20XX

<sup>&</sup>lt;sup>1</sup> President, Vice-President, Partner or Owner, or if signed by other than one of the foregoing, Power of Attorney signed by one of the foregoing should be attached. Indicate applicable designation.