

SMALL BUSINESS ENTERPRISE (SBE) RECERTIFICATION APPLICATION

Directions: Please complete this application in its entirety. **Do not leave any items blank.** Write "None" or "Not Applicable" as necessary. Please note that all supporting and required documentation identified <u>MUST</u> be provided to process your application. The **City of Charlotte reserves the right to request additional information**, **if warranted**, **to verify eligibility**. Make a copy of this signed application and keep for your records.

SBE RECERTIFICATION ELIGIBILITY REQUIREMENTS

- Significant business presence within the Charlotte CSA.
- □ 51% or more of the applicant business must be owned by one or more "Eligible Owners."
- ☐ Firm's eligible owners each have a personal net worth less than \$750,000.
- □ Firm's 3 year average gross receipts are less than ¼ SBA (Small Business Size) Standards.
- □ Firm's SBE Certification has not lapsed more than 12 months.

REQUIRED DOCUMENTS

Please provide the following required documents:

- ☐ Firm's Federal Tax Returns, including Schedule C / Schedule K-1, for the past 3 years.
- □ Current Trade License(s) and/or Professional Designations/Certifications where applicable.
- □ Completed Personal Net Worth Form for <u>each</u> eligible owner.

GENERAL INFORMATION						
Vendor #:						
Name of Business (or DBA name):						
Legal Name of Business (if different):						
Number of Employees:		Full Time:		Part Time:		
Physical Street Address:						
City:		State:	Zip:	County:		
Mailing Address (If different than physical address):						
City:		State:	Zip:	County:		
Phone:	Fax:		Web Address:			

PRIMARY CONTACT INFORMATION					
☐ Mr. ☐ Ms.	Name:	Position:			
Phone:	Fax:	Email:			

ELIGIBLE OWNER CONTACT INFORMATION						
☐ Mr. ☐ Ms. Name:	Name:		Position:			
Phone: Fax:		Percentage of Business Owned:				
Email:						
	ELIGIBLE OWNER CONTAC (IF APPLICABL					
☐ Mr. ☐ Ms. Name:	N					
Phone: Fax:		Percentage of Business Own	ned:			
Email:						
	QUESTIONNA	AIRE				
During the past 3 years, have there been a	-			T		
 Significant business presence (new 		t)	Yes	No 🗌		
 Legal structure (Proprietorship, Par 	· · · · · · · · · · · · · · · · · · ·		Yes	No 🗆		
 Eligible Owners (including changes 			Yes	No 🗌		
Corporation's Officers, Directors, orBusiness agreements (Partnership		anta II.C Operating	Yes	No 🗌		
Agreements, etc.)	Agreements, Shareholder Agreem	ents, LLC Operating	Yes	No 🗌		
 Duties of owners or other key empl 	loyees		Yes	No 🗌		
 Licenses (Trade/Professional Designation 		Yes	No 🗌			
Work Specialty (NIGP Code(s))			Yes	No 🗌		
If you answere	ed YES to any of the above, pleas	se submit supporting documer	ntation.			
	AFFILIATE INFOR	MATION				
DEFINITIONS "Significant Connection" means any of the following: a) 5% or greater ownership interest (as shareholder, partner, etc); b) membership on the board of directors; c) employment relationship; or d) ability to control decisions.						
"Key Personnel" means any owner, shareholder, partner, director, officer, or person in a management role of the applicant business. Key Personnel includes but is not limited to all persons who are counted as Eligible Owners for purposes of applying for SBE certification.						
"Owner" means any person or entity having a greater than five percent (5%) ownership interest, whether as a shareholder, partner, limited partner, sole proprietor, etc.						
"Related Industry" means the same general industry or field as the applicant business, or a business those contracts with other businesses in the applicant business' industry or field. For instance, plumbing would be a Related Industry to general construction.						
Questions 1. Do any of the Key Personnel of the applicant have a significant connection with another business? If yes, please describe: Yes □ No □ No □						

2. Do any family members of the Key Personnel have a significant connection with another business in a related industry? Yes No I like the significant connection with another business in a related industry?
3. Has more than twenty-five percent (25%) of the applicant business' annual revenue in any of the past three (3) years derived from either: (a) a single business entity, or (b) a group of business entities which share the same parent company? If yes, please identify each such business and the amount of revenue it has provided per year.
4. Does the applicant business share any of the following with another person or business entity: a) office space, warehouse space, or other facilities, b) assets or equipment; or c) employees? If yes, please identify what is shared and the person or entity it is shared with:
5. Has the applicant business leased or borrowed any of the following from a person or another business entity in a related industry within the past 3 years: a) office space, warehouse space, or other facilities; or b) assets or equipment? If yes, please identify what was leased or borrowed and the person or entity it was leased or borrowed from:
6. Has the applicant business, within the past 5 years, received any loans or other financing from any individual or other business that is not a bank or lending institution? Yes No If yes, please identify the individual or business, the year and amount of each loan and the current balance:
SIGNATURE OF MAJORITY OWNER The undersigned swears under penalty of perjury that the application responses and accompanying documents are true, complete and correct to the
best of his/her knowledge.
PRINTED NAME
SIGNATURE DATE(MM/DD/YYYY)