

**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 **MUST** 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

- 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 each eligible owner.
- Gender & Ethnicity Form for each 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		
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Name:	Position:
Phone:	Fax:	Percentage of Business Owned:
Email:		

ELIGIBLE OWNER CONTACT INFORMATION (IF APPLICABLE)		
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Name:	Position:
Phone:	Fax:	Percentage of Business Owned:
Email:		

QUESTIONNAIRE		
During the past 3 years, have there been any changes to the firm's:		
▪ Significant business presence (new address/updated lease agreement)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Legal structure (Proprietorship, Partnership, Corporation, LLC, etc.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Eligible Owners (including changes in any shares)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Corporation's Officers, Directors, or By-Laws	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Business agreements (Partnership Agreements, Shareholder Agreements, LLC Operating Agreements, etc.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Duties of owners or other key employees	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Licenses (Trade/Professional Designation)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▪ Work Specialty (NIGP Code(s))	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If you answered YES to any of the above, please submit supporting documentation.

AFFILIATE INFORMATION

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? Yes No
 If yes, please describe:

2. Do any family members of the Key Personnel have a significant connection with another business in a related industry? Yes No
If yes, please describe:

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? Yes No
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? Yes No
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? Yes No
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)