

THE CITY OF SAN DIEGO

SMALL LOCAL BUSINESS ENTERPRISE PROGRAM

APPLICATION

Submit Applications to: City of San Diego SLBE Program Certification 202 C Street, Mail Station 9A San Diego, CA 92101 Questions regarding application status: (619) 235-5295 Questions regarding application: (619) 236-6297

APPLICATION

This application and associated documents are not public records, subject to the Public Records Act, and are not open for public inspection. All information provided will be kept confidential to the extent permitted by law.



Are you bidding on a City project? Date of bid: Project Title and Bid Date:					Date & Time Received by Equal Opportunity Contracting (For Equal Opportunity use only)
	Ownership T check all that			ck current certifications, if any, held by your ness and submit copy of certification(s)	Received Date
			DB	E	
				BE	Approval Date
Sole Proprietor					
Partnership					Expiration Date
Corporation, S-Corp, LLC			WBE		
				ro	
lf you	Ir business is a St	ate Certified D	VBE or Micro-I	business, please provide documents for iten	ns A thru M only in the section below.
Proté		-	-	bmit a copy of participant agreement and ite	ems G, K, and L only
	Sole Proprietor	Partnership	Corp/S/LLC	Required Copies of Documents	
A	X	Х	Х	Rental Agreement for office space/home (Cover	
B	X	X	X	Rent receipt or cancelled check (if owned; prope	erty tax or deed showing ownership)
C	X	X	X	City of San Diego Business Tax Certificate	
D E	X X	X X	X X	Resume of Key owners(s) management	
_	^	^	^	Appropriate License Number and Classification (i.e., Contractor, Architect, Engineer, etc.) TRUCKERS ONLY: Current DMV Vehicle Registration, Motor Carrier Permit, rental	
F	Х	Х	Х	agreement for the local parking site	
G	Х	Х	Х	Employer Identification Number	
Н	Х	Х	Х	Current Payroll Tax records for ALL offices	
I	Х	Х	Х	DE-6 quarterly State wage and withholding report.	
J			Х	Corporate License, including date approved by (
К	Х	Х	Х	Copies of three local contracts outlining the scope of work for which certification is being requested, if more than one scope of work submit additional contracts.	
L	х	Х	Х	Copies of current certifications, (<i>i.e.</i> DBE, DVBE, MBE, WBE, UDBE,)and copy of passport, driver's license, birth certificate (only one of these is necessary).	
М	Х	Х	Х	Bond letter stating limits for single project and aggregate program (for Public Works contracts only)	
Ν	Х			3 Most Recent Federal Income Tax (1040) inclu	ding Schedule C & SE
0		Х		3 Most Recent Federal Income Tax (1065) inclu	•
Р			Х	3 Most Recent Federal Income Tax Returns 112 owners	20(s), Schedule E, 4562, 1099 W-2s of
1. Nar	me of Company, incl	uding DBAs(Doir	ng Business As):		
2. Principal Place of Business: (see definition in proposed program document) EIN:					
3. Mai	ling Address:				
4. Ow	ner's Name(s):				
5. Telephone: Fax:			:	Cell:	E-mail:

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6. Date Business was established in San Diego:				
7. If business address and/or phone number is the same as residence, is there another office located outside the residence: Yes No			No	
If Yes, please indicate City and State:				
This question is not applicable to State Certified DVBE and Mic	ro Businesses.			
8. Does any owner have an interest in any other business? 🗌 Yes 🔲 No				
If yes, please identify all businesses and submit 3 most recent tax returns for each business.				
This question is not applicable to State Certified DVBE and Mic	ro Businesses.			
9. Does any owner's spouse/domestic partner have interest in any c	other business?	Yes 🗌 No		
If yes, please identify all businesses and submit 3 most recent tax re	eturns for each busi	ness.		
10. Are any owner(s) also employees of the City of San Diego?] Yes 🔲 No			
If yes, in what capacity?				
	, ,			
 Indicate the nature of the firm's business and NAICS Codes 	Construction	General Services	Professional Services	Supplier
12. Indicate name of license holder, type of license, and license number.				

13. Work Description: Briefly describe the type of services and/or products your firm provides.

14. Truckers: List the types of trucks and trailers your company owns or lease.

15. Suppliers must submit: a) authorized letters from all manufacturers; and b) a current copy of inventory list. This list will be verified at time of site visit

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16. Ownership Information: Identify all owners of the business, including race/ethnicity and gender.

Name	Race/Ethnicity	Gender	Percentage of Ownership

17. List the last three relevant projects performed by the company. Also submit copies of three local contracts outlining the scope of work for which certification is requested/if more than one scope of work, submit additional contracts.

Project Name, Owner/Prime	Total Dollar Amount of Contract	Date Completed

(a) Total number of owner(s) who live in the San Diego City and County

	(b) Total number of owner(s) who live outside of San Diego City and County
19. Total number of employees:	(a) Total number of employees who live in the San Diego City and County
	b) Total number of employees who live outside of San Diego City and County

20. Enter total annual payroll amount for the Business: \$_____ Enter total annual payroll amount for San Diego City and County Office: \$_____

AFFIDAVIT

18. Total Number of owners

The undersigned declares and swears under penalty of perjury that the foregoing statements are true, correct, and complete and accurately explain the operations of (name of firm):

Additionally, the undersigned agrees, during the term of this certification, to immediately notify the City of San Diego when changes in the information provided on this application occur.

Further, the undersigned agrees to provide through the prime contractor or, if no prime, directly to the City current, complete and accurate information regarding actual work performed on projects; the payment thereof; and proposed changes, if any, of the foregoing arrangements. The undersigned agrees to permit the audit and examination of books, records, and files of the named firm. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal, state, or local laws concerning false statements.

Name of Firm (print)

Name and Title (print)

Date

Signature

June 17, 2010

This document is not a public record.