



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 Type check all that apply	Please check current certifications, if any, held by your Business and submit copy of certification(s)	Received Date
☐ Sole Proprietor ☐ Partnership ☐ Corporation, S-Corp, LLC	☐ DBE ☐ DVBE ☐ UDBE ☐ MBE ☐ WBE ☐ Micro	Approval Date Expiration Date

If your business is a State Certified DVBE or Micro-business, please provide documents for items A thru L only in the section below.
Protégés in the City's Mentor Protégé Program - submit a copy of participant agreement and items G, K, and L only

	Sole Proprietor	Partnership	Corp/S/LLC	Required Copies of Documents
A	X	X	X	Rental Agreement for office space/home (Cover page and signature page of agreement)
B	X	X	X	Rent receipt or cancelled check (if owned; property tax or deed showing ownership)
C	X	X	X	Business Tax Certificate
D	X	X	X	Resume of Key owners(s) management
E	X	X	X	Appropriate License Number and Classification (i.e., Contractor, Architect, Engineer, etc.)
F	X	X	X	TRUCKERS ONLY: Current DMV Vehicle Registration, Motor Carrier Permit, rental agreement for the local parking site
G	X	X	X	Employer Identification Number
H	X	X	X	Current Payroll Tax records for ALL offices
I	X	X	X	DE-6 quarterly State wage and withholding report.
J			X	Corporate License, including date approved by California Secretary of State
K	X	X	X	Copies of three contracts outlining the scope of work for which certification is being requested, if more than one scope of work submit additional contracts.
L	X	X	X	Copies of current certifications, (i.e. DBE, DVBE, MBE, WBE, UDBE,) and copy of passport, driver's license, birth certificate (only one of these is necessary).
M	X			3 Most Recent Federal Income Tax (1040) including Schedule C & SE
N		X		3 Most Recent Federal Income Tax (1065) including Schedule K-1
O			X	3 Most Recent Federal Income Tax Returns 1120(s), Schedule E, 4562, 1099 W-2s of owners

1. Name of Company, including DBAs(Doing Business As): _____

2. Principal Place of Business:
(see definition in proposed program document)

EIN: _____

3. Mailing Address: _____

4. Owner's Name(s): _____

5. Telephone: _____

Fax: _____

Cell: _____

E-mail: _____

6. Date Business was established in San Diego: _____

April 8, 2010

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7. If business address and/or phone number is the same as residence, is there another office located outside the residence: ☐ Yes ☐ No

If Yes, please indicate City and State:

This question is not applicable to State Certified DVBE and Micro 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.

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9. Does any owner's spouse/domestic partner have interest in any other business? ☐ Yes ☐ No

If yes, please identify all businesses and submit 3 most recent tax returns for each business.

10. Are any owner(s) also employees of the City of San Diego? ☐ Yes ☐ No

If yes, in what capacity?

11. Indicate the nature of the firm's business and NAICS Codes _____	Construction ☐	General Services ☐	Professional Services ☐	Supplier ☐
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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 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

18. Total Number of owners _____ (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

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

April 8, 2010

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