

OHIO TURNPIKE COMMISSION

Minority and Female Business Enterprise

Certification Application



MINORITY AND FEMALE BUSINESS ENTERPRISE

It is the policy of the Ohio Turnpike Commission to attempt to ensure the fullest possible opportunity for participation of all firms, including firms owned and controlled by minorities and females in the participation of contracts, leases, purchase orders and all forms of agreement where work, labor, services, supplies, equipment and materials, or any combination of the foregoing involves funds expended by or on behalf of the Ohio Turnpike Commission.

Through the MBE/FBE program, the Ohio Turnpike Commission is furthering its effort to aid economic development in the State of Ohio and give minority and female companies an opportunity to achieve their own socioeconomic goals.

To be considered for our program, "minority/female business enterprise" shall mean a business concern, which is owned and controlled by one or more minorities or females for at least one (1) year prior to applying. For the purpose of this definition: (1) "Minority Person" means an individual who is African American, Hispanic, Asian American, American Indian, Alaskan native or female; (2) "Owned and Controlled" means a business which is at least 51 percent owned by one or more minorities and whose management and daily business operations are controlled by one or more such individuals.

To become certified the attached Information for Determining Minority and Female Business Enterprise Eligibility application should be completed in its entirety and mailed along with all required background documentation to the Ohio Turnpike Commission's Minority Business Enterprise Office. All certifications are subject to continued review by the OTC.

MBE/FBE APPLICATION CHECKLIST

COMPANY NAME _____

I. **Attach copies of all documentation that pertains to your business.** If an item is not applicable to your business, mark "N/A" on the blank line provided. Check (✓) on the blank line if documentation is provided (**all items must be checked or marked N/A**).

Prior two years tax information filed

_____ Sole Proprietorship (copy of Form 1040 with Schedule C attached)

_____ Partnership (copy of Form 1040 with Schedule E and Form 1065 attached)

_____ Joint Venture (include applicable Federal Tax Schedules)

_____ Corporation (IRS Corporate return)

_____ Birth Certificate or Driver's License

_____ Articles of Incorporation

_____ Verification of Business Structure (License to do business, assumed name certificate, Secretary of State registration, etc.)

_____ Copy of Minutes of First Corporation Meeting

_____ Copy of Share Ledger Information showing stock ownership, transfers, cancellations

_____ Equipment List including owned and/or leased

_____ Employee List

_____ Resume of person(s) who have control of day-to-day operations

_____ Trade References

_____ Page 4 must be notarized

II. List 5 major customers

1. _____

2. _____

3. _____

4. _____

5. _____

III. List geographical area covered by your company.

The application must be fully completed and no application will be accepted unless it is printed or typewritten, notarized and bears the signature of the owner(s).

If approved, certification by the Ohio Turnpike Commission will remain intact until notified otherwise. The Commission performs periodic reviews to determine if there has been a substantial change that may affect the minority and/or female ownership.

**INFORMATION FOR DETERMINING
MINORITY AND FEMALE BUSINESS ENTERPRISE ELIGIBILITY**

1. I am applying for certification as a:

Minority Business Enterprise _____

Female Business Enterprise _____

2. Name of Firm _____

3. Address of Firm _____

4. City _____ State _____ Zip Code _____

5. Telephone _____ Fax _____

E-Mail _____

6. Ownership of Firm – Indicate one of the following:
(Must have ownership of company for one (1) year prior to applying for certification)

A. Sole Proprietorship _____ Date Established _____

B. Partnership _____ Date of Agreement _____

C. Corporation _____ Date of Incorporation _____

D. Other Business Entity (please specify) _____

7. Provide the most recent tax information filed.

8. Nature of Firm's business _____

9. Years firm has been in business _____

10. Identify those persons who have 5% or more of the firm's ownership. Column D & E should be completed only if ownership is less than 100% minority or female:

	A. Name	B. Ethnic Status	C. Years Owned	D. Owner %	E. Voting %
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

11. Submit copy of birth certificate or drivers license
12. Firms which are less than 100% minority or female owned must list the contributor of money, equipment, real estate, or expertise of each of the owners.
13. Provide true copies of the Articles of Incorporation and necessary licenses to do business.
14. Provide a true copy of the Minutes of the first Corporation Meeting.
15. Provide true copies of the Share Ledger Information, showing stock ownership, stock transfers, and stock cancellations.
16. Provide an updated equipment list including office, vehicles, tools, etc. which are owned and/or leased by company.
17. Provide an updated employee list.
18. Control of Firm: Identify by name, race, and title in the firm the individual who is responsible for day to-day management and policy making, including, but not limited to, the person with the prime responsibility:
 - A. Financial decisions _____
 - B. Management decisions, such as:
 - (1) Estimating _____
 - (2) Marketing and Sales _____
 - (3) Hiring and firing of management personnel _____
 - C. Supervision of field operations _____
19. For the person(s) listed in Item 18, provide a resume of a brief summary of experience, number of years with the Firm and qualifications for the responsibilities given him/her.
20. Describe or attach a copy of any stock options or other ownership option that are outstanding and any agreement between owners or between owners and third parties which restrict ownership or control of minority owners.
21. Identify any owner (see item 10) or management official (see item 18) of the named Firm who is or has been an employee of another Firm that has an ownership interest in or a present business relationship with the named Firm. Present business relationships include shared space, equipment, financing, or employees as well as both Firms having some of the same owners.

22. What were the gross receipts of the Firm for each of the last two years?

Year ending _____ \$ _____
Year ending _____ \$ _____

23. Name of bonding company, if any _____

24. Sources of Letters of Credit, if any _____

25. Provide list of trade references:

A. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

B. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

C. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

D. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

E. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

F. Name _____
Address _____
City _____
State _____ Zip Code _____
Contact Person _____

26. Indicate if this Firm or other Firms with any of the same officers have previously received or been denied certification or participation as a Minority or Female Business Enterprise and describe the circumstances. Indicate the name of the certifying authority and the date of such certification or denial.

NOTE: If after filing this Information for Determining Minority and Female Business Enterprise Eligibility there is any significant change in the information submitted, the Ohio Turnpike Commission must be informed of the change(s).

Completed application along with required background documentation should be mailed to:
Ohio Turnpike Commission
Minority & Female Business Enterprise
682 Prospect Street
Berea, OH 44017-2799

STATE OF)
)
COUNTY OF) AFFIDAVIT

The undersigned swears that the foregoing statements are true and correct and include all material information to identify and explain the operations of _____ as well as the ownership thereof.
(Name of Firm)

Further, the undersigned agrees to provide to the Ohio Turnpike Commission complete and accurate information regarding changes, if any, in the foregoing arrangements and 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 and State Laws concerning false statements.

DATE _____
(Name) (Title)
(Corporate Seal - where appropriate)

STATE OF)
)
COUNTY OF) SS

On this _____ day of _____, 20_____, before me appeared _____, to me personally known, who, (Name) being, duly sworn, did execute the foregoing affidavit, and did state that he or she was properly authorized by _____ to (Name of Firm) execute the affidavit and did so as his or her free act and deed.

(Notary Public)

(Commission expires)