



# City of Austin

Founded by Congress, Republic of Texas, 1839

Small & Minority Business Resources Department, Certification Office, 4201 Ed Bluestein Blvd. Austin, TX 78721

Mailing Address: PO Box 1088, Austin, TX 78767-1088, Telephone (512) 974-7645

## Small Business Construction Procurement Program (SBCP) Small Business Enterprise Affidavit for Owner and SMBR

Name of Firm: \_\_\_\_\_

City of Austin Vendor Code: \_\_\_\_\_

I, \_\_\_\_\_ (Owner) certify as evidenced by my signature below I have provided business tax returns, as appropriate, for the year(s) \_\_\_\_\_, to SMBR for inspection and review to determine eligibility for the City of Austin SBCP Certification. As reflected in these tax returns, my firm's average gross receipts over the past three (3) years have NOT exceeded \$15 Million, the U.S. Small Business Administration's Subsectors 238-Specialty Trade Contractors size standard and the threshold for the City of Austin SBCP. In connection with that review, I understand SMBR may take written notes from these tax returns for their files in lieu of keeping copies of the returns. I further certify all information and statements I have provided to SMBR staff are true and correct. I understand all documents may be subject to review at any time by representatives of the City of Austin. If a request is made by the City to review such documents, I understand these documents must be provided to SMBR for review within seven (7) business days.

**Please include a copy of the Owner's current resume.**

\_\_\_\_\_  
Printed Name of Eligible Applicant

\_\_\_\_\_  
Signature of Eligible Applicant

Subscribed and sworn to before me, the undersigned notary public, on this \_\_\_\_\_ (day) of \_\_\_\_\_ (month), 20\_\_\_\_ (year).

\_\_\_\_\_  
Notary Public's Seal

\_\_\_\_\_  
Notary Signature

### THE FOLLOWING WILL BE COMPLETED BY A SMBR STAFF MEMBER:

I certify as evidenced by my signature below I have inspected and reviewed the tax return(s) provided by the applicant to determine eligibility for the City of Austin Small Business Enterprise Construction Procurement Program. According to the documents provided, the annual gross receipts or number of employees of the applicant and its affiliates are as follows:

Year of Tax Return	Gross Receipts	NAICS Code	Total Gross Receipts:
			\$
			<b>Three (3) Year Average:</b>
			\$

\_\_\_\_\_  
Printed Name of SMBR Staff Member

\_\_\_\_\_  
Signature of SMBR Staff Member

Subscribed and sworn to before me, the undersigned notary public, on this \_\_\_\_\_ (day) of \_\_\_\_\_ (month), 20\_\_\_\_ (year).

\_\_\_\_\_  
Notary Public's Seal

\_\_\_\_\_  
Notary Signature