



CITY OF HOUSTON

OFFICE
of
BUSINESS OPPORTUNITY

SBE 3 Year Update Form and Affidavit Required for Small Business Enterprises

Please Note: This affidavit is for SBEs ONLY. If you are SBE firm and also an MBE, WBE, PDBE, ACDBE or DBE you must fill out the MWSBE/PDBE form every three (3) years to maintain your MWSBE/PDBE certification and the ACDBE/DBE Annual Update form on an annual basis to maintain your ACDBE/DBE certification instead of this form. If you fail to provide this form and affidavit with supporting documentation in a timely manner, you will be deemed to have failed to cooperate with the required 3 year SBE certification update process to maintain certification eligibility.

1. Name of Firm: _____

2. Owners Full Name: _____

3. Telephone Number: _____ Fax Number: _____

4. Business Address: _____
Street Number City State Zip Code

5. Mailing Address: _____
Street Number City State Zip Code

6. Has the legal structure, ownership, management, or control of your company changed since your last certification?

YES NO

If yes, please explain and provide documentation reflecting changes.

7. List the number of employees employed during the previous three (3) years:

Employee Workplace Demographics by year	<u>Full Time</u>	<u>Part Time</u>	<u>Contract</u>
20____			
20____			
20____			

8. Do you have ownership or share in the management of another firm(s)? Please provide the name of the firm(s) and your ownership percentage.

9. Company Income Tax Identification Number: _____

10. E-mail Address: _____ Internet Web Page/URL Address: _____

11. Have you included your Income Tax Forms from the previous year? YES NO

Firm's Exact Gross Receipts for the past three (3) years: (Include these returns with your Update Form)

Year Ending	Exact Gross Receipts
20____	\$ _____
20____	\$ _____
20____	\$ _____

12. List all other firms that any owner holds ownership in or shares resources with:
(Include these returns with your Update Form)

Firm name	# of employees	Gross receipts 3 yr. average	Title with Affiliate firm	Percentage of ownership
		\$ _____		
		\$ _____		
		\$ _____		

13. Current professional license: (Include license with your Update Form)

Type	Name of Holder	License Number	Expiration

Bonding Information (If you have bonding capacity, identify):

- Binder Number: _____
- Name of agent/broker: _____
- Phone Number: _____
- Address of agent/broker: _____

City
State
Zip
- Bonding limit: Aggregate limit: _____ Project Limit: _____

Documentation to be included with this Update Form:

- Previous three (3) years business returns for this firm **and** all affiliate firms.
Examples: Corporation-Form 1120, LLC or Partnership-Form 1065, Sole proprietorship-(entire) Form 1040 Schedule C
- All licenses, license renewal forms, and registrations
- Signed affidavit (attached)

AFFIDAVIT

I hereby declare and affirm that I am the owner of _____ whose address is _____
(Name of Firm)
_____. I declare and affirm that there have been
(Street, City, State and Zip Code)

no changes in the circumstances of _____ affecting its ability to meet the,
(Name of Firm)
requirement of the City of Houston’s SBE program. There have been no material changes in the information
provided with _____ Update Form for certification, except for any changes about
which
(Name of Affiant/Owner)

you have provided written notice to the City of Houston. _____ meets
(Name of Firm)

Small Business Administration (SBA) criteria for being a small business concern and its average annual gross receipts (as defined by SBA rules) over the firm’s previous three fiscal years do not exceed the size standard for my classification.

We require that you submit with this affidavit documentation of the firm’s size and gross receipts in the form of the previous three (3) year’s business Income Tax Returns and disclosure of the firm’s number of employees.

I do solemnly declare and affirm under the penalty of perjury that the contents of the foregoing document are true and correct, and that I am the owner of the above company.

(Date) _____
(Affiant/Owner)
State of County of _____ City of _____

On this _____ day of _____, 20____, before me, _____, the undersigned officer, personally appeared _____, known to me to be the person described in the foregoing Affidavit and stated on his/her oath that he/she is over 18 years of age, of sound mind, capable of making this Affidavit, and has personal knowledge to facts states in it and that he/she executed the same in the capacity therein states and for the purpose therein contained.

I witness thereof, I hereunto set my hand and official seal.

(Notary Public) (Seal)

My commission expires: _____

*****Please return this original form, retaining a copy for your records.*****