



600 East Trade Street, Suite 300 Charlotte NC 28202 (704) 336-3380 • Fax (704) 432-1414

Email: charlottebusinessinclusion@charlottenc.gov

Relevant Market Area Certificate

Please complete, sign, date, and mail this certificate to the address above.

I, (Your Full Name)	an owner of	(Name of Business)
have full knowledge of the o	perations of this firm and hereby atte	st to the following:
	attest that my business is certified with the State	
of North Carolina H	(istorically Underutilized Business (N	C HUB) Office as an
2. I,	attest tha	t my firm is headquartered in
(State/ Statistical Area (CSA	County)	is part of the Charlotte Combined
*The Charlotte CSA incl	udes the following counties within the state o	North Carolina: Anson, Cabarrus, Gaston, the following counties in South Carolina: York,
Part E of the CBI Program, the accurate in all respects, and t		
Signature of Owner	Title	Date
Signature of Owner		 Date