

City of Orlando Reciprocal Certification Policy

(ref: Sec. 57.29 – City Code)

Thank you for your interest in Reciprocal Certification from the City of Orlando Minority/Women-Owned Business Enterprise Department. Companies meeting the certification criteria and holding current MBE or WBE certifications from Orange County Government Business Development Division may request reciprocal certification when bidding on any of the three (3) Community Venue Projects (Events Center, Performing Arts Center and Citrus Bowl Renovations).

All firms requesting reciprocal certification must meet the following requirements:

- A. Applicants must submit a letter of their intent to bid on a community venue project prior to the time that they submit their bids to a contractor. They shall provide a copy of the application which they submitted to Orange County Business Development Division along with an affidavit attesting to the authenticity and truthfulness of the documentation presented. ([sample letter and affidavit](#)) A copy of a current Orange County Government Business Development Certificate must accompany the letter.
- B. Under no circumstances may a firm which is currently under suspension or debarment or which has been denied certification or recognition by the City of Orlando in the six (6) months preceding its request for reciprocity with the City of Orlando MBE/WBE program, use this reciprocity policy to circumvent the imposed sanctions or actions of the City. Additionally all applicants for reciprocity must be in current good standing with all other foreign jurisdictions under which they are certified or recognized.
- C. Once the MBE Coordinator verifies the status of a company granted reciprocity, the company shall receive temporary certification or recognition for a maximum period of four (4) months; however, said temporary status shall not be effective beyond the termination of their MBE/WBE status with their originating jurisdiction.
- D. Prior to the expiration of the four (4) month period, the files of the company granted reciprocity, as maintained by the MBE Coordinator, shall be presented to the Certification Board. The Certification Board shall then review this file to determine whether the MBE/WBE should be granted status as a certified or recognized company pursuant to City Code Section 57.29(2).

Important: Applicants requesting reciprocal certification must have their status verified by the MBE Coordinator prior to bidding on the Community Venue Projects (Events Center, Performing Arts Center and Citrus Bowl Renovations), where they wish their participation to be counted towards the City's MBE/WBE goals. Failure to do so will result in no credit being given and the applicant will be prohibited from applying under the reciprocity provision and will be required to apply through normal channels. Be sure to read the City of Orlando Certification Board Rules carefully before completing the request. The Certification Board Rules explain the Certification Program rules and regulations.

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SAMPLE LETTER

[Date]

Mr. Kevin Walsh, MBE Official
City of Orlando
Minority/Women Business Enterprise
400 S. Orange Avenue
Orlando, FL 32802

Re: Request for Reciprocal Certification

Name of Project Bidding: _____

Contract #: _____

Name of Prime Contractor
/Project Team Bidding with: _____

Scope of Work Bidding: _____

MWBE Status Requested (Check One): ☐ MBE ☐ WBE

Dear Mr. Walsh:

I, _____ of _____
[Printed Name of Authorized Representative] [Company Name]

request that my company be granted reciprocal certification with the City of Orlando, to do business on the above listed project.

Attached is a copy of my current Orange County Government Business Development Minority/Women Business Certification, and the requested Affidavit, signed and notarized.

Sincerely,

[Printed Name & Title of Company Representative]

Affidavit

I am executing this affidavit, and state that I am properly authorized by (name of firm)
_____ to execute the affidavit and am doing so as a free
act and deed.

The undersigned affirms that the foregoing statements are true and correct and include all
material information necessary to identify and explain the operations of, (name of the firm)
_____ as well as the ownership
thereof.

Furthermore, I understand that I may not:

- Fraudulently obtain, retain, attempt to obtain nor aid another in fraudulently obtaining or retaining or attempting to obtain minority and/or women-owned business enterprise certification:
- Willfully make a false statement, whether by affidavit, report, or other representation, to City official or employee for the purpose of influencing the certification or denial of certification of any entity as a minority and/or women-owned business enterprise; or
- Willfully obstruct, impede, or attempt to obstruct or impede any City Official or employee who is investigating the qualifications of a business entity which had requested certification as a minority business enterprise.
- All information and documents submitted along with the request for Reciprocal Certification become an official public record. As such, the certifying entity bears no obligation to return to the applicant any items of original production or any copies of file documents.
- The applicant consents to examinations of its books, records and premises and to interviews of its principals, employees, business contacts, creditors, and bonding companies by the certifying entity for the purpose of determining the applicant's eligibility for certification.
- Pursuant to Section 287.094, Florida Statutes, the false representation of any entity as a minority and/or women-owned business enterprise for purpose of qualifying for certification as such under this program may be punishable as a felony of a second degree. The certifying entity may initiate such disciplinary actions it deems appropriate including, but not limited to, forwarding pertinent information to the Department of Legal Affairs and/or certifying entity's legal counsel for investigation and possible prosecution:

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[Signature of Authorized Company Representative]

[Printed Name]

[Title]

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this ____ day of _____, 20____, by
(name of person making statement) _____

(NOTARY SEAL)

[Signature of Notary]

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____