



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 CPA

Name of Firm: _____

City of Austin Vendor Code: _____

I certify, as evidenced by my signature below, I have provided all supporting documentation to _____ (Name of CPA & Firm), a certified public accountant (CPA), in order that he/she may verify my Small Business Enterprise size eligibility. I further certify all information and statement I have provided to the CPA are true and correct. I understand all documents I have provided to the CPA may be subject to review by representatives of the City of Austin. If a request is made by the City of Austin to review such documents, I understand these documents must be provided to SMBR for review within seven (7) business days. I further understand if, upon investigation, it is determined incorrect information was knowingly or willfully provided or that false representations were otherwise made in connection with this application, the small business certification shall be revoked or denied and the matter shall be evaluated for possible sanction under the law. I hereby authorize the City to permit the Director to obtain from third persons (e.g., utility companies, business references and lessors/lessees) information relevant to my eligibility for small business certification. I hereby affirm the information in this affidavit is true and correct.

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 IS TO BE COMPLETED BY THE CPA:

I certify, as evidenced by my signature below, I am a CPA in good standing with the local State Board of Public Accountancy, I have reviewed the business tax returns provided by the applicant and I have verified the small business size standard for _____ (Name of Firm) and the gross receipts over the past three (3) years have NOT exceeded \$15 Million, the U.S. Small Business Administration's subsector 238-Specialty Trade contractors size standard and the threshold for the City of Austin's SBCP. The tax returns provided reflect:

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

Printed Name of CPA & License No.

Signature of CPA

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

Notary Public's Seal

Notary Signature

The City of Austin is committed to compliance with the Americans with Disabilities Act. Reasonable modifications and equal access to communications will be provided upon request.