



ST. LOUIS LAMBERT INTERNATIONAL AIRPORT™



City of St. Louis

Minority Business Enterprise (MBE)/Women Business Enterprise (WBE) Program

Request for Certification in Additional Area(s) of Expertise

Name of Firm:		
Street Address:		
City:	State:	Zip:

Additional type of work requested:

List and attach documentation of the 5 largest contracts or supply invoices completed for the additional type of work requested.

Owner/Contractor	Phone	Contract Amount	Project Name/Location	Type of Work Performed

List all equipment you own or lease used to perform the additional type of work requested. Copies of current lease agreements or proof of payment must be attached.

Type of Equipment	Make	Model	Year	Date Acquired	Present Value

Please attach any other documentation or information relevant to the additional type of work your firm is requested. This can include documentation of technical licenses, leases of property or facilities, training or expertise.

Signature	
Printed name	
Title	
Date	

MBE/WBE Affidavit for Certification in Additional Area(s) of Expertise

A MATERIAL OR FALSE STATEMENT MADE IN CONNECTION WITH THIS REQUEST FOR NAICS CODE REVIEW IS SUFFICIENT CAUSE FOR REMOVAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, CANCELLATION OF ANY CONTRACTS OR SUBCONTRACTS, SUSPENSION OR DEBARMENT, AND MAY SUBJECT THE PERSON OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.

I, _____ (Full Name), swear or affirm under penalty of law that I am _____ (Title), of Firm, _____ (Firm Name), and that the foregoing statements are true and correct to the to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities, and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted with this request is for the purpose of inducing approval by the City of St. Louis Airport Authority for certification in additional areas of expertise. I authorize the St. Louis Airport Authority to determine the accuracy of such information by contacting any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's additional areas of expertise.

I understand and agree to comply with policies and procedures, and the City of St. Louis Airport Authority must grant certification to my firm only for specific types of work in which the minority and/or women owners have the ability to control the firm. To become certified in an additional area of expertise outside of the three-year renewal process, the MBE/WBE firm must demonstrate that the MBE and/or WBE has the ability to manage and control work in the additional area(s) of expertise.

I agree to submit to audits, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its place(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial and/or revocation of certification.

I agree to furnish written notice to the City of St. Louis Airport Authority of any material change in the information contained in the original application and/or my request for additional areas of expertise within 30 days of such change (ex: ownership, address, telephone number, etc.).

I acknowledge and declare under penalties of Federal and State laws that the foregoing is true and correct.

Signature (Chief Executive Officer or Principal Owner)

Subscribed and sworn before me this _____ Day of _____ 20 ____

Signed _____
Notary Signature

My Commission Expires _____

SEAL