

Small Business Enterprise (SBE) Program Checklist

To qualify as a participant in the City of Tulsa’s SBE Program:

- ❖ Owners must be U.S. citizens or lawfully admitted permanent residents of the U. S.
- ❖ Owners and individuals with an interest in the business must not be currently an officer or employee of the City of Tulsa.
- ❖ Business must be for profit, independent, and currently a functioning business maintaining a local business presence in the Tulsa Metropolitan Statistical Area (MSA): Tulsa, Creek, Okmulgee, Rogers, Wagoner, Osage or Pawnee counties.
- ❖ Business owner and/or his employee must have the training/expertise to perform the work, and where required, has an issued license or certificate.

In order to begin processing the application, copies of ALL supporting documents as they apply to you and your firm must be attached.

All Applicants Must Provide:

- Provide work experience Business Resume or Capability Statement for all owners, officers and anyone listed on the application.
- Completed and signed copy of Request for **Transcript of Business Tax Return** (Form 4506-T due annually).
- Signed and dated Personal Financial Statement for all owners with 20% or more financial interest in applicant firm.
- Provide a list of current licenses/permits held by any owner and/or employee and attach a copy of the license.
- Provide copy of Certification from the Secretary of State of Oklahoma.
- Provide a list of major contracts/projects (goods and services) completed by your firm in the past year.
- Proof of Citizenship: Common documents that establish U.S. citizenship or lawfully admitted permanent residents are:
 - **Birth Certificate**, issued by a U.S. State (if the person was born in the United States), or by the U.S. Department of State (if the person was born abroad to U.S. citizen parents who registered the child’s birth and U.S. Citizenship with the U.S. Embassy or consulate);
 - **U.S. Passport**, issued by the U.S. Department of State;
 - **Certificate of Citizenship**, issued to a person born outside the United States who derived or acquired U.S. citizenship through a U.S. citizen parent; or
 - **Naturalization Certificate**, issued to a person who became a U.S. citizen after 18 years of age through the naturalization process.
- Liability Insurance: _____

(Name of Insurance Agent/Broker)
(Phone)
(City, State)

Can you provide contract (performance and payment) bonds? Yes No Unsure
 Please provide brief reason if you responded “No” or “Unsure”:

- Signed and notarized Affidavit for owner(s) (included in application package)

Note: Certain projects will require bonding. Please ensure you meet all qualifications. All applicants must provide a signed and notarized affidavit. Failure to respond to questions could result in the denial of your firm’s SBE application. Please black-out any Social Security numbers from all documents before submitting to the City of Tulsa. The Mayor’s Office for Human Rights does not guarantee contracts or membership approval. **Incomplete applications will be destroyed after 30 days.**

PROJECT/WORK EXPERIENCE FORM
(Example)

Project Title / Work Experience <i>Specify Residential or Commercial</i>	Location	Specific Work Items Performed	Dollar Value of Work Performed	Contact/Reference Name \ Phone Number
Woodward Park/XYZ Company	2100 Mocking Bird, Tulsa, OK	Sidewalks Curbs & Gutters	\$30,000 \$15,000	John Doe / (918) 555-0000

(Select Category) Prime Contractor Architect/Engineer Sub-Contractor Vendor Supplier Professional Other: _____

Project Title / Work Experience <i>Specify Residential or Commercial</i>	Location	Specific Work Items Performed	Dollar Value of Work Performed	Contact/Reference Name \ Phone Number



PERSONAL FINANCIAL STATEMENT

Small Business Enterprise (SBE)

Today _____, 2____

Complete this for : (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guarantee on a loan. Spouses, regardless of ownership, must be included on this form.

Owner Name _____	Business Name _____
Residence Address _____	Business Phone (include area code) _____
City, State, Zip code _____	Residence Phone (include area code) _____

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on Hand & in Banks	\$ _____	Accounts Payable	\$ _____
Savings Accounts	\$ _____	Notes Payable to Banks and Others	\$ _____
IRA or Other Retirement Accounts . . .	\$ _____	(Describe in Section 2)	
Life Insurance-Cash Surrender Value Only	\$ _____	Installment Account (Auto)	\$ _____
(Complete Section 8)		Monthly Payments	\$ _____
Stocks and Bonds	\$ _____	Installment Account (other)	\$ _____
(Describe in Section 3)		Monthly Payments	\$ _____
Real Estate	\$ _____	Loan on Life Insurance	\$ _____
(Describe in Section 4)		Mortgages on Real Estate	\$ _____
Automobile-Present Value	\$ _____	(Describe in Section 4)	
Other Personal Property	\$ _____	Unpaid Taxes	\$ _____
(Describe in Section 5)		(Describe in Section 6)	
Other Assets	\$ _____	Other Liabilities	\$ _____
(Describe in Section 5)		(Describe in Section 7)	
Total	\$ _____	Total Liabilities	_____
		Net Worth	\$ _____

Section 1. Source of Income	
Salary	_____
Net Investment Income	\$ _____
Real Estate Income	\$ _____
Other Income (Describe below)*	\$ _____

Contingent Liabilities	
As Endorser or Co-Maker	\$ _____
Legal Claims & Judgments	\$ _____
Provision for Federal Income Tax	\$ _____
Other Special Debt	\$ _____

Description of Other Income in *Section 1

Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income

Section 2. Notes Payable to Banks and Others (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral



PERSONAL FINANCIAL STATEMENT Small Business Enterprise (SBE)

Today _____, 2_____

Section 3. Stocks and Bonds purchased by business owner (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

Number of Shares	Name of Securities	Cost	Market Value Quotation Exchange	Date of Quotation Exchange	Total Value

Section 4. Real Estate Owned (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities (Describe in detail)

Section 8. Life Insurance Held (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize the City of Tulsa to make inquiries as necessary to verify the accuracy of the statements made and to determine my status as a small business concern. I certify the above and the statements contained in the attachments are true and accurate.

Signature: _____

Date: _____

Request for Transcript of Tax Return

^a **Do not sign this form unless all applicable lines have been completed.**
^a **Request may be rejected if the form is incomplete or illegible.**
^a **For more information about Form 4506-T, visit www.irs.gov/form4506t.**

OMB No. 1545-1872

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	
City of Tulsa Mayor's Office for Human Rights 175 E 2nd St Suite 675 Tulsa OK 74103 (918) 596-7818	

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ^a _____

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

| / / | / / | / / | / / |

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Phone number of taxpayer on line 1a or 2a

Sign Here

 Signature (see instructions) Date

 Title (if line 1a above is a corporation, partnership, estate, or trust)

 Spouse's signature Date

AFFIDAVIT

City of Tulsa's Small Business Enterprise (SBE)

OWNERSHIP OF FIRM:

Identify all partners and stockholders by name, title, and percentage of ownership. (Provide additional list if needed)

Name	Title	% Owned

Note: All listed above must equal 100% ownership and agree to the information provided in this application.

The signer's business meets the following criteria:

1. The business serves a commercially useful function, and has been in operation for at least one (1) year;
2. The business is located in one of the following counties: Tulsa, Creek, Okmulgee, Rogers, Wagoner, Osage or Pawnee;
3. The business is a provider of supplies, services or construction;
4. The average gross receipts or sales shall not exceed: **Service and Supplies \$3,000,000 | Construction \$5,000,000.**
5. The personal net worth does not exceed \$1,500,000.

I understand that this affidavit affords my company SBE status for a period of one (1) year. SBE status may be denied/revoked for the following reasons:

- a) Willfully making a false statement, report or other representation to a City official or employee for the purpose of obtaining SBE status.
- b) Willfully obstructing, impeding or intending to obstruct or impede any City official or employee who is investigating the qualification of a business entity that has requested SBE status.
- c) Failure to provide sufficient information to the Human Rights staff or the Human Rights Commission on which a determination of eligibility can be based.
- d) Refusal to permit on-site inspections.
- e) Refusal to comply with a request for information or access to records.
- f) Failure to report changes in the status or activities of the business entity or its SBE status which affect the SBE's eligibility to qualify for the program.
- g) Gross negligence, incompetence, financial irresponsibility, or misconduct in the performance of contractual obligations or services.
- h) An SBE business that bids and is awarded a project with the intent to subcontract all of the work to another SBE-qualified or non-qualified business



AFFIDAVIT

City of Tulsa’s Small Business Enterprise (SBE)

Name of Business: _____

Business Location: _____
No. & Street City (County) State Zip

STATE OF _____)
)ss.
COUNTY OF _____)

I _____, being duly sworn that the foregoing statements concerning the location of the business, type of industry, annual sales volume and other expressed criteria accurately describes the operations of the business. I will comply with the requirements of the City of Tulsa’s Title 5, Section 100 of the Tulsa Revised Ordinances and all policies implemented under these divisions. I certify that the information provided in this application and affidavit is accurate and truthful. I understand the failure to comply could result in revocation of being qualified for the SBE Program. I also certify that no officer or employee of the City of Tulsa directly or indirectly has financial interest in my company.

Signature _____ Title _____ Date _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____

Notary Commission Number: _____

Send or Deliver Application and Supporting Documents To:

**Mayor’s Office for Human Rights
175 E. 2nd Street, Suite 675
Tulsa, OK 74103**

Or Email To: Humanrightsdept@cityoftulsa.org