



City of Memphis Equal Business Opportunity and Small Business Enterprise

OFFICE OF CONTRACT COMPLIANCE REGISTRY		
APPLICANT INFORMATION		
Business Name/DBA:		
Business Owner:	Phone:	Fax:
Owner's email address:	Website:	Contact Person:
Physical address:	City:	State/Zip Code:
Mailing address:	City:	State/Zip Code:
Select one option that represents the largest proportion of ownership of the business.		
Owner's Ethnicity: African American _____ Asian _____ Caucasian _____ Hispanic _____ Native American _____ Native Hawaiian or Pacific Islander _____		
Select one option that represents the largest proportion of ownership of the business.		
Gender: Female _____ Male: _____		
CERTIFICATION INFORMATION		
Certification Agency: <i>Please indicate the certification on which you are basing this registration.</i> Mid-South Minority Business Continuum-Uniform Certification Agency (UCA) _____ Tennessee Minority Supplier Development Council (TMSDC) _____ Women's Business Enterprise Council (WBEC) _____	Expiration date: _____ MM/DD/YYYY	

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Certification Classification:

Select all that apply based on the certification types your firm has with the recognized agencies.

Minority Owned Business Enterprise (MBE) _____

Women Owned Business Enterprise (WBE) _____

Small Business Enterprise (SBE) _____

North American Industry Classification System (NAICS) Commodity Service Codes *(see attachment)*:

National Institute of Governmental Purchasing (NIGP) Commodity Service Codes *(see attachment)*:

Description of Business:

Industry *(see attachment)*:

CONSTRUCTION INDUSTRY

Tennessee Classification:

License Number:

Bonding Capacity:

Agent: _____

Address: _____

Phone: () _____

Contact Person: _____

Type of Bonding

Coverage Limits:

Please submit on Company's letterhead job classification/type of work along with experiences and descriptions (Scan and email document to certification@memphistn.gov)

Mandatory Documents:

All mandatory documents must be provided with the application. Failure to submit a mandatory document will result in a delay in processing and/or could result in denial.

Mandatory Documents:

1. Signed Affidavit (Download, print and sign the affidavit)
2. Please submit a copy of business license with OCC registry application. (Scan and email to certification@memphistn.gov)
3. Please submit a copy of your MBE, WBE and/or SBE certificate along with the document provided by your certifying agency which identifies the commodity codes if not displayed on your certification or letter of certification. (Scan and email to certification@memphistn.gov)

Required Documents:

Required documents must be provided when applicable to your firm. Failure to submit a required document without explanation as to why any such attachment was not provided will result in a delay in processing and/or could result in denial.

I authorize the verification of the information provided on this form.
Signature of applicant:

Date: _____
MM/DD/YYYY