NOTICE OF CHANGES AND ANNUAL AFFIRMATION OF DBE PROGRAM ELIGIBILITY

North Dakota Department of Transportation, Civil Rights Division

SFN 52158 (Rev. 04-2015)

Part A

Instructions: SFN52158 -- Parts A & B -- and the required accompanying documentation shall be submitted by the DBE owner(s) every year by the due date found in the Eligibility Review Approval letter provided by the Department.

Submit all documents listed in the Required Documents list below. Submit all applicable Supplementary Documents from the list below.

Return all required documents and the original, notarized SFN52158 "Notice of Changes and Annual Affirmation of DBE Program Eligibility" in one package.

☐ Check box if your contact information has changed

Name of Business			
DBE Owner's Name(s)			
Mailing Address	City	State	ZIP Code
Physical Address			
Business Phone Number	Business Fax Number	Cell Phone Number	
E-mail Address	Internet Address		

Required Documents - Submit the following documents	Check if Attached
Business **Federal Tax Returns** for each DBE owner	
Written Statement and Listing of Business Size and/or Gross Receipts (SFN52158 Part B)	

Supplementary Documents Submit documents below **ONLY** if changes have occurred.	Check if Attached
Balance Sheet and/or Profit Loss Statement	
Home State and other Current State(s) Certification letter(s)/Certificate(s)	
Name(s), Title(s), and Percentage(s) of Business Ownership (Separate sheet)	
Employees (Separate sheet) List all key personnel, title/position, average hours worked per week, and annual compensation	
Corporate Minutes	
Significant Changes: Explain any changes in the business on a separate sheet of paper and attach to this document	
New Owners: (include a description of their responsibilities, investment made to acquire ownership and documentation of the contribution, Stock Certificates issued/transferred/exchanged)	
Owner's/Employees' involvement in another business: (Indicate the other Business name; owner/employee name; type of business and the nature of the business relationship (i.e., current owner, employee or previous owner)	
Business Description	
Resumes for owner and key personnel	
Agreements: (Updated and/or additional agreements)	
Articles of Incorporation and/or Bylaws (if amended)	
Vehicle Information (Trucking and/or Construction firms): Submit new or updated vehicle information listing the (1) Type, (2) Serial Numbers and purchase agreements on equipment; (3) Lease, rental and lease, rental and purchase agreements (e.g., if lease to own); and (4) Insurance documents on the equipment	
New Work Areas/Services Additions or changes to existing work description; include NAICS Code (NAICS website at: http://www.sba.gov/size/) Use SFN17542 Checklist of Services, to request any changes in DBE certified services.	
DBE Directory Listing (If changes are necessary, attach the DBE Directory Page with changes clearly marked.)	

PART B

Submit a separate copy of SFN51258 for each DBE owner.

Affidavit Year

Name of Business

I, _____, owner of _____(Business Name) swear or affirm that during the previous 12 months there have not been any changes in circumstances, affecting this business ability to meet the size, disadvantaged status, ownership, or control requirements of 49 CFR Part 26 and 13 CFR Part 121. I further declare that there have been no material changes in the information provided with my application for certification except for any changes which have been provided to the North Dakota Unified Certification Program by written notice as required under 49 CFR §26.83(i).

I declare that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified in 49 CFR §26.5, without regard to my individual qualities. I further declare that my personal net worth does not exceed $1,320,000, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business that are not socially and economically disadvantaged.

In addition, I specifically declare that _____(Business Name) continues to meet the U.S. Small Business Administration business size criteria and the overall gross receipts cap of 49 CFR Part 26.

The firm's gross receipts for the last three years do not exceed $23,980,000 as shown below:

2012	2013	2014

I declare under penalty of perjury that the foregoing is true and correct.[1] I understand any material misrepresentation is grounds for perjury and subsequent sanctions or prosecution.

Name of Owner (Print or Type)	Title
Signature of Owner	Date

STATE OF _____ COUNTY OF _____

On this _____ day of _____, 20___, _____ personally appeared before me, a notary public, and is known to me to be the person named in and who executed the foregoing instrument and acknowledged that they executed the same.

(Notary Seal)

_____
NOTARY PUBLIC (Type or Print name)

_____
NOTARY PUBLIC (Signature)

My Commission Expires _____

[1] Knowingly and willfully providing false information to the Federal Government is a violation of 18 U.S.C. Section 1001 and could subject you to fines, imprisonment or both.