COUNTY OF LOS ANGELES
Department of Consumer and Business Affairs

COMMUNITY BUSINESS ENTERPRISE PROGRAM (CBE)

APPLICATION FOR PARTICIPATION

Please select one: First Time Certification ☐ Recertification ☐ CBE #: _____
(If recertification, indicate CBE number)

Los Angeles County Vendor Registration (WebVen) #: _____

INSTRUCTIONS: All applicants must complete sections ❶ through ❼ and the attached **Acknowledgement of Sanctions**. You should also register your business with the County's Vendor Registration (WebVen) website at http://camisvr.co.la.ca.us/webven/ to participate in the County's online access to County open bids, be placed on bid lists generated by County departments looking for prospective vendors, and periodically be notified automatically by email of County bids by specific commodities and services.

❶ GENERAL BUSINESS INFORMATION (Indicate "N/A" if not applicable to your business)

Name of Business		
Principal Place of Business Address (Do not use P.O. Box) *P.O. box is not acceptable to determine principal place of business*		
City	State	Zip Code
Mailing Address (if different)		
Telephone Number ( )	Fax Number ( )	Email Address *(Highly Recommended)
Contact Person for the Business		Title

* The CBE Program is moving towards electronic automation to conduct its business. Your email address will enable us to notify and correspond with you more efficiently.

❷ MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES

Type of participation requested (check all that apply):

☐ Minority Business Enterprise (MBE)
☐ Women Business Enterprise (WBE)
☐ Disadvantaged Business Enterprise (DBE)
☐ Disabled Veteran Business Enterprise (DVBE)

DBEs and DVBEs wishing to participate must be currently certified by another authorized governmental certifying agency and must submit a copy of the certification with your application.

Complete the following questions:	Yes	No
a. Is your firm a minority and/or women **owned** business?	☐	☐
b. Is your firm at least **51%** minority or women owned?	☐	☐
c. Is your firm's daily business operations **controlled or managed by** one or more minorities or women?	☐	☐

❸ OWNERSHIP INFORMATION (Refer to section ❻ for required documentation)

Race/Ethnicity of owner(s):	☐ Black/African American ☐ Asian or Pacific Islander ☐ Filipino	☐ Hispanic/Latino ☐ American Indian
Gender of Owner:	☐ Male	☐ Female
Type of Ownership:	☐ Sole Proprietorship ☐ Partnership	☐ Corporation ☐ Limited Liability Company

List owners and their percentage of interest

Name	Race/Ethnicity	Gender		Percentage of Ownership	U.S. Citizen	
		Male	Female		Yes	No

❹ CERTIFICATION BY ANOTHER PUBLIC AGENCY

Is your firm currently certified as a MBE, WBE, DBE, DVBE or 8(A) by another public Agency? Yes ☐ No ☐

(A list of County recognized governmental certifying agencies is available at osb.lacounty.gov)

You may be eligible for CBE participation under the Federal Small Business Administration 8(A) definition as a small business which is unconditionally owned and controlled by one or more socially and economically disadvantaged individuals who are of good character and citizens of the United States, and which demonstrates potential for success. For certification as an 8(A) visit the Federal Small Business Administration at http://www.sba.gov/content/8a-business-development-0

If yes, complete the following and attach proof of certification. **THE COUNTY DOES NOT ACCEPT SELF-CERTIFICATION.**

Agency Name	CHECK TYPE OF CERTIFICATION				Certification Expiration Date (mm/dd/yy)
	Minority (MBE)	Women (WBE)	Dis-advantaged (DBE)	Disabled Veteran (DVBE)	

❺ STANDARD INDUSTRIAL CLASSIFICATION (SIC) DESCRIPTION

Identifying a Standard Industrial Classification (SIC) description for your specific business type, specific industry and/or goods and service will help potential business partners and contracting agencies locate your firm from our CBE listing. List the appropriate SIC description of goods and/or services provided by your business. A searchable list of SIC descriptions and codes is available at the U.S. Department of Labor's Standard Industrial Code website at http://www.osha.gov/pls/imis/sicsearch.html or call our office at (877) 669-2237 to request assistance.)

SIC Description	Code	SIC Description	Code

❻ REQUIRED SUPPORT DOCUMENTS

Include the following required documents with your certification application for each owner. Your application will be delayed without the required documents. Based upon your submitted information, it may be necessary for your business to submit additional supporting documentation to determine your eligibility.

For **MBE** and/or **WBE** participation, attach a copy of the following documents for each owner claiming minority and/or women owned status. Owners who are not U.S. citizens must submit proof of legal permanent residence.

▪ **Proof of MINORITY status** Examples of acceptable evidence are: ✓ birth certificate ✓ passport [if owner(s) from another country] ✓ naturalization data and proof of legal residency	▪ **Proof of WOMEN status** Examples of acceptable evidence are: ✓ birth certificate, and ✓ drivers license, or ✓ passport

In addition, submit the following copies of documentation for your **Type of Ownership**:

Sole Proprietorship	**Partnership**	**Corporation**
• License to do business or fictitious business name filing	• License to do business or fictitious business name filing • Partnership agreement • Detailed business plan, if in business less than one year	• License to do business or fictitious business name filing • Article or Certificate of Incorporation and/or corporate bylaws • Detailed business plan, if in business less than one year

For **DBE** and **DVBE** participation, attach a copy of your certification from a County recognized governmental certifying agency (refer to part ❹)

❼

I declare under penalty of perjury under the laws of the State of California that the information is true and correct and that the foregoing statements are true and includes all material information necessary to identify and explain the operations of _____ and the ownership thereof.
(Name of business)

Owner/Principal Signature: _____ Title _____

Print Name: _____ Date _____

Note: To avoid delays in processing your application, complete all necessary information, sign, and date; include all required documents and email to ctucker@dcba.lacounty.gov or mail to the address below:

County of Los Angeles, Consumer and Business Affairs
Small Business Services
1100 N. Eastern Avenue, 1st Floor
Los Angeles, CA 90063

FOR OFFICIAL USE ONLY	Review file contents		Additional Information		Approved		Denied	
	Initial	Date	Initial	Date	Initial	Date	Initial	Date

ACKNOWLEDGEMENT OF SANCTIONS
COMMUNITY BUSINESS ENTERPRISE PROGRAM

It is the policy of the County of Los Angeles Board of Supervisors that it is unlawful for any person to knowingly submit fraudulent information with the intent of receiving Community Business Enterprise (CBE) certification and avail themselves of any benefits for which they are not entitled.

This is to acknowledge that the undersigned, on behalf of himself or herself individually and on behalf of his or her business or organization, is fully aware of the following policy of the County of Los Angeles.

A. A person or business shall not:

1. Knowingly and with the intent to defraud, fraudulently obtain, retain, attempt to obtain or retain, or aid another in fraudulently obtaining or retaining, or attempting to obtain or retain, acceptance or certification as a community business enterprise; for the purposes of this article.

2. Willfully and knowingly make a false statement with the intent to defraud, whether by affidavit, report, or other representation, to a County official or employee for the purpose of influencing the acceptance or certification or denial of acceptance or certification of any entity as a minority and/or women owned business enterprise, or both.

3. Willfully and knowingly obstruct, impede, or attempt to obstruct or impede, any County official or employee who is investigating the qualifications of a business entity which has requested acceptance or certification as a community business enterprise.

4. Knowingly and with intent to defraud, fraudulently obtain, attempt or obtain, or aid another person or business in fraudulently obtaining or attempting to obtain, public monies to which the person or business is not entitled under this article.

B. Any person or business who violates the above shall be suspended from bidding on, or participating as a contractor, subcontractor, or supplier in any County contract or project in accordance to the provisions of Chapter 2.202 of the County Code (Determinations of Contractor Non-responsibility and Contractor Debarment).

C. No County agency with the powers to award contracts shall enter into any contract with any person or business suspended for violating this section during the period of the person's or business' suspension. No awarding department shall award a contract to any contractor who uses the services of any person or business as a subcontractor suspended for violating this section during the period of their person's or business' suspension.

The undersigned acknowledges, on behalf of him/herself, individually and on behalf of his/her business or organization, is fully aware of the above policy of the County of Los Angeles and declares under penalty of perjury under the laws of the State of California that the information is true and correct.

Name of Firm:_____ Date:_____

Authorized Signature _____ Title: _____