REGIONAL TRANSPORTATION DISTRICT Small Business Opportunity Office 1660 Blake St. BLK-31 Denver, CO 80202



RTD's Small Business Enterprise (SBE) Certification Program Recertification Info Sheet

RTD administers the RTD SBE Program and certifies firms to participate on its locally funded projects with SBE goals. RTD supports community in business and strives to protect and provide value to the small, minority, and disadvantaged business community. Becoming and remaining RTD SBE-certified provides small businesses with no-cost inclusion on the RTD SBE directory that increases visibility for contract opportunities and participation that will count toward RTD projects with SBE goals. Firms will also receive personal invitations to business marketing and outreach events and will have higher visibility with other agencies such as Denver Public Schools and Denver Water. RTD SBEs also enjoy secure contract protection clauses on RTD contracts including prompt payment, retainage release, and no reduction, replacement, or termination without cause.

All firms seeking to continue participation in RTD's SBE Program must complete the RTD's SBE Recertification application process every six (6) years to remain on RTD's SBE directory. Failure to submit a recertification will result in loss of SBE certification.

SBE Certification Eligibility Criteria

RTD's SBE Program is open to any business, regardless of the race or gender of its owner(s), if it meets the following guidelines:

- 1. The average annual gross receipts for the business for the past 3 years may not exceed \$30.40 million. This includes any affiliate businesses owned in whole or in part by any owner of the business applying, regardless of their ownership interest; and
- 2. The business must be at least 51% owned by one or more individuals whose personal net worth is less than \$1.32 million not including the equity in their primary residence or their equity/investment in the business applying. Applicants cannot transfer ownership solely for the purpose of qualifying for the SBE program.

Recertification Application

If your business still qualifies, please complete and submit the attached RTD SBE Application & Affidavit and Personal Financial Statement. Both forms, along with the supporting documents listed on the checklist included in this packet must be submitted. Please note, RTD only accepts these SBE Certification Application and Personal Financial Statement forms. Alternative forms are not accepted. Documents may be submitted via email to SBO@RTD-Denver.com.

Recertification Processing & Review

RTD's Small Business Opportunity Office will process recertifications on a first-come, first-serve basis. Applications must be received in full before the SBE recertification review can begin. If your application is incomplete, you will be notified via email of the specific deficiencies. Missing information must be submitted within 14 days unless an alternate time is agreed to. The total recertification review timeline may take up to 45 days.

Subject: SBE Recertification Fact Sheet

Page 2



Recertification Decision

Once the recertification review is complete, you will receive a letter of continued certification or denial based on ineligibility. This letter will include the NAICS codes indicating the types of work performed by the firm that may be counted toward RTD's SBE goals. If found in-eligible, you will receive a letter that explains RTD Small Business Opportunity Office's findings and reasons for ineligibility, specifically referencing the evidence in the record that supports each reason for denial.

RTD's SBE recertification is valid for six (6) years from the last day of the month in which it was recertified if the business remains within the business size and personal net worth guidelines. After six (6) years, firms must complete another recertification. Failure to submit a recertification application will result in loss of SBE certification.

Non-Response & Incomplete Applications

All firms seeking to continue participation in RTD's SBE Program and to receive notice of RTD contract opportunities, invitations to business marketing and outreach events, and be considered for projects of other agencies including Denver Public Schools and Denver Water, must complete the RTD's SBE Recertification every six (6) years to remain on RTD's SBE directory. If a firm does not respond to the recertification request, or if they fail to send in all requested information by the firm's 6-year certification anniversary date, they will be notified of the deficiency by email. The notification will give fourteen (14) days for the firm to show cause as to why it should remain certified. Should the firm fail to respond after fourteen (14) days, unfortunately, the business will be notified that it has been removed from RTD's SBE directory. A firm whose certification has been removed for non-response may reapply for SBE certification no sooner than twelve (12) months from the date of initial removal letter.

Questions?

If you have questions or concerns, please contact the Small Business Opportunity Office by email at SBO@RTD-Denver.com.

Please visit the Business Center at www.rtd-denver.com for more information on RTD's SBE Program, including the full RTD SBE Policies and Procedures, information on doing business with RTD, and upcoming events and contracting opportunities.

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RTD Small Business Enterprise (SBE) Recertification Documents Checklist

The RTD SBE Policies and Procedures require firms to Recertify every six (6) years on their Certification Expiration Date. This is to ensure that all participating firms and qualifying owners have remained eligible for the RTD SBE Certification program and only firms that are SBE-qualified will receive SBE contract opportunities and count toward participation in RTD projects with SBE goals. RTD supports community in business and strives to protect and provide value to the small, minority, and disadvantaged business community.

II fi	irms completing their Recertification must provide the following:
	A complete, signed, and notarized RTD SBE Certification Application & Affidavit.
	Personal financial statement for EACH economically disadvantaged owner comprising 51% or more ownership of the firm. Please note, only RTD's personal financial statement form will be accepted; alternative agency's forms will not be accepted.
	Federal income tax returns, including all supporting schedules and attachments, for the firm and all affiliates for the past (1) year. If an extension has been filed for the most recent year, provide the extension and the previous year's tax return.
	Personal federal income tax returns, including all supporting schedules and attachments, for each economically disadvantaged owner for the past (1) year. If an extension has been filed for the most recent year, provide the extension and the previous year's tax return.
	Current resumes, including education and dates and places of employment with duties and responsibilities held, for all owners, directors, officers, and key personnel.
	Copies of all licenses and certifications necessary to engage in the firm's operations.
	A Certificate of Good Standing issued by the Colorado Secretary of State.
	A Statement of Foreign Entity Authority issued by the Colorado Secretary of State (if applicable).
	An itemized list of current inventories available for sale (for suppliers of goods only).

☐ An itemized list of all equipment owned and leased by the firm.

Subject: RTD SBE Recertification Documents Checklist

Page 2



Please email all required documents to SBO@RTD-Denver.com. Keep in mind that not submitting your Recertification documents will affect your certification status.

The SBE Certification Application & Affidavit and RTD Personal Financial Statement are attached to this packet and also available for download at https://www.rtd-denver.com/business-center/dbesbe/forms.

The burden of proof to demonstrate continued eligibility for RTD's SBE program is on the applicant. If an applicant does not provide requested information within the allotted time provided by RTD, or if it submits incomplete information, RTD may presume that disclosure of the missing information would adversely affect the firm or would demonstrate lack of eligibility in the area to which the information relates. Failure to supply the required documents, or any subsequently requested documents, may unfortunately result in denial of RTD SBE recertification.

RTD reserves the right to conduct a site visit and request additional information/documentation as it deems necessary.

If you have any questions or need assistance, please contact RTD's Small Business Opportunity Office at SBO@RTD-Denver.com.



REGIONAL TRANSPORTATION DISTRICT SMALL BUSINESS OPPORTUNITY OFFICE 1660 Blake St., BLK-31 Denver, CO 80202



RTD SMALL BUSINESS ENTERPRISE (SBE) CERTIFICATION APPLICATION

INSTRUCTIONS: All questions must be answered, and complete information provided. **DO NOT LEAVE ANY SPACE BLANK; ENTER "N/A" FOR NOT APPLICABLE.** Please email your completed application, Personal Financial Statement(s), and supporting documentation to SBO@RTD-Denver.com. Forms are available for download at https://www.rtd-denver.com/business-center/dbesbe/forms. If the application is not legible, complete, signed, dated, notarized, and accompanied by all documentation, you will be contacted to correct the deficiency. For assistance or questions, please reach to the Small Business Opportunity Office at SBO@RTD-Denver.com.

_	lication Type		About RTD's SBE Pr						
		☐ I am Rece				Communit	y Event:		
	J Receitification	☐ Word of M	louth	Other					
								1	
1.	Name of Firm							2. EIN	
3.	Physical Address			City			State	Zip	
Э.	Physical Address			City			State	Ζίρ	
4.	Mailing Address (if different)			City			State	Zip	
5.	Owner Name						6. Busir	ness Phone	
7.	Email			8. Web	cite				
/.	Lindii			o. Web	Site				
9.	Type of Ownership (Check or	ne)							
	Sole Proprietor	Partnership	☐ Limi	ted Liability Co	mpany (LLC))		Corporation	
10.	Date Established		11. Date Incorpo	orated/Organize	d		12. Sta	te of Incorporation	
13.	Nature of the Firm's Work								
14.	14. Primary Owner's Citizenship, Ethnicity, and Gender								
-	renship	Ethnicity	- -				Gender		
	US Citizen		Black	☐ Hispanio	C			Female	
	☐ Lawful Permanent Reside	ent 🗖 S	Subcontinent Asian	_	American			Male	
	Other (Explain)		Asian Pacific	☐ Other				Other	
			Caucasian						



15. Ownership Details

If yo	u indicated	Sole Pro	prietor in	Question	10,	please	provide	the	following	information:
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Name		Social Security Numb	er	# of Years as Owner
If you indicated Partnership, Limited Liability pages if needed):	Company (LLC), or Corpo	ration in Question 10,	please provide the follow	ing information (attach additional
Name	Board/Management Position	Number of Shares Held	Ownership %	Date Acquired
Total Number of Shares Issued	Total Nu	mber of Shares Outsta	nding	
 16. Is the firm owned in full or in part by anothed Yes No (If yes, on a separate sheet, list the parent minorities, please indicate.) 17. Identify any individual named in questions 16 firm that has an ownership interest in or pemployees, equipment, or financing. Explain 	company's owners, percer 6 or 17 who currently is, or present business relations	r who was within the la hip with the firm. Pre	st three years, an owner,	manager, or employee of another
18. Have there been any transfers/changes of or	wnership in the past two y	ears?		
☐ Yes ☐ No (If yes, explain on a separa	ate sheet.)		



19. Management – indicate control of firm in the following areas:

☐ Yes

			,
	Name	Relationship to owners	Title
Financial Decisions			
Estimating			
Marketing/Sales			
Hire/Fire Personnel			
Purchasing Major Equipment/Supplies			
Supervision of Field Operations			
Jobs the Company Selects			
Surety and/or Performance Bonds			
Insurance			
Checking Account Signature Authority			
Negotiating and Signing Contracts			
20. Were any of the individuals liste	d above on another company's payroll concurr	ent with employment with the applicant	t firm?

ividuals l	listed above on another company's payroll concurr	ent with employment with the applicant	: firm?
	No		



		year.						
Tax Year	Gross Receipts	#	of Employees					
2. Does the company own/le sheet, by type and quantit	ease the equipment necessary	/ to provide the essent	ial functions of its business	? (List owned/leased equip	ment on separa			
Yes	No							
3. List all certifications (DBE,	MBE, WBE, ESB, SBE, etc.) th	ne firm has received &	years certified. (Please pro	vide copies of certification le	tters.)			
4. Has the firm ever been de	nied certification by a govern	ment agency? (If yes,	provide copies of all such de	enial letters and any appeal	decisions.)			
– v –								
☐ Yes ☐	No							
	in questions 16, or 17 been a	an owner or manager	with a firm that has been d	enied certification? (If yes,	please provide a			
5. Has any individual named explanation on a separate Yes 6. List the three (3) largest	in questions 16, or 17 been attachment.) No contracts and contact informa							
5. Has any individual named explanation on a separate Yes 6. List the three (3) largest usiness references with contact	in questions 16, or 17 been attachment.) No contracts and contact informact information.	ation completed by the	firm. If the firm does not	perform contract-based wo	ork, provide thre			
5. Has any individual named explanation on a separate Yes 6. List the three (3) largest	in questions 16, or 17 been attachment.) No contracts and contact informa							
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25. Has any individual named explanation on a separate Yes	in questions 16, or 17 been attachment.) No contracts and contact information. Contact Person	Phone Number Pror a list of NAICS co	Contract Amount Odes, go to www.census.gov	perform contract-based wo	ork, provide thre			



RTD SBE CERTIFICATION APPLICATION AFFIDAVIT

The undersigned swears under penalty of perjury, that the information provious includes all material information necessary to identify and explain the operation	
as well as the ownership thereof.	(Name of Firm)
The undersigned also states that they have the authority to execute the affidav	rit and does so as his or her free act and deed.
The undersigned also affirms that:	
 The business can perform all listed services in a professional and cor The business has legal access to all listed products and can provide to The business is operating within the following SBE Program guideline 	them in a timely manner; and
 The average annual gross revenues for the business for the past The personal net worth of the qualifying owner(s) of the busine equity in their primary residence and in the applicant business. 	
Any fraud or misrepresentation concerning information provided in the applicand/or certification and may result in the maximum legal prosecution allowed by	
As a participant in the RTD SBE Program, I promise to notify the RTD Small B <u>Denver.com</u> , within thirty (30) days in writing of:	usiness Opportunity Office; SBO@RTD-
 Any changes to ownership, location, contact information and/or Any change of the financial status of the business or qualifying ow of the RTD SBE Program as outlined above. 	
I understand that this RTD SBE certification may be investigated, audited, sus the discretion of the RTD Small Business Opportunity Office.	pended, or revoked at any time for cause at
(Printed Name)	(Title)
(Signature)	(Date)
NOTARY	
The foregoing affidavit was subscribed and sworn to before me on this	day of, 20
by	
SEAL	
	Notary Public Signature

Commission Expiration Date

Regional Transportation District

INDIVIDUAL PERSONAL FINANCIAL STATEMENT

(Submit with SBE Certification & Recertification Applications)



As of,20		(CC	NFIDE	N	TIAL				
INSTRUCTIONS: Complete this for more of the company's ownership any item blank; enter "0" or "N/A	. Thi	s form shou	ld ir	nclude individ	dua	l assets only; j	ointly-he	eld asset	ts should be s	plit. Do not leave
Name				Bus	iness Pho	one				
Residence Address							Res	idence Ph	none	
City, State, & Zip Code										
Business Name of Applicant										
ASS	SETS	(Omit Cents)						LIA	BILITIE \$ Omit C	Cents)
Cash on Hand and in Banks		\$ _			12	.Accounts Payabl	e			\$
2.Savings Accounts		\$			_13	. Notes Payable t	o Banks a	and Other	rs	\$
3. IRA or Other Retirement Account		\$ _				(Describe in Section	•			
4. Accounts and Notes Receivable		\$								\$
5. Life Insurance – Cash Surrender Va	alue O	nly\$								\$
(Complete Section 7)										. \$
6. Stocks and Bonds(Describe in Section 2)						(Describe in Section	on 3)			\$
7.Real Estate		9	\$		<u>1</u> 8	Unpaid Taxes (Describe in Section)	on 5)			. \$
8. Automobiles(s) – Present Value		\$_			19.Other Liabilities\$					
9. Other Personal Property (Describe in Section 4)		\$_			(Describe in Section 6) 20. Total Liabilities (add lines 12-19)\$					
10.Other Assets Including Business Own (Describe in Section 4)	nershi	p Interestss	\$		_					
11. Total Assets (add lines 1-10)		\$_			21. Net Worth					
Sources	of In	come					(Conting	ent Liabilities	
22.Salary		\$_			26. As Endorser or Co-Maker \$					
23. Net Investment Income		\$			27.Legal Claims and Judgements\$					
24. Real Estate Income		\$			28. Provision for Federal Income Tax\$					
25.Other Income		\$			29. Other Special Debt \$\$					
Section 1 Notes Payable to Ba	nks a	nd Others (Jse a	ttachments if ne	cess	sary. Each attachm	ent must b	e identifie	d as part of this s	tatement and signed.)
Name and Address of Noteholder(s)	Original Balance		Current Balance		Payment Amount	Frequ (month	iency ily, etc.)		ured or Endorsed of Collateral
		\$		\$		\$		-		
		\$		\$		\$				
		\$		\$		\$				
Section 2 Stocks and Bonds (U	se atta	chments if nec	essar	y. Each attachm	nent	must be identified	as part of	this staten	nent and signed.)	
Name of Securities		umber of ares Held		Cost		Market Val			Date of ion/Exchange	Total Current Value
			\$			\$, , , ,	\$
			\$			\$				\$
			\$			\$				\$
			\$			\$				\$
			Ψ		!	-				7

CONFIDENTIAL

Section 3. Real Estate Owned (List each property separately. Include your primary residence. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)							
	Property A	Property B	Property C				
Type of Property							
Address							
Date Purchased							
Original Cost	\$	\$	\$				
Current Market Value	\$	\$	\$				
Name of Mortgage Holder							
Mortgage Account Number							
Mortgage Balance	\$	\$	\$				
Payment Amount	\$	\$	\$				
Status of Mortgage							
	perty and Other Assets (Describe; if e delinquency. Use attachments if necessa		e and address of lien holder, amount of lien, spart of this statement and signed.)				
Section 5. Unpaid Taxes (Descr	ibe in detail as to type, to whom payable, a	mount and date due, and to what propert	y, if any, a tax lien attaches.)				
Section 6. Other Liabilities (De	scribe in detail. Use attachments if necess	ary. Each attachment must be identified a	as part of this statement and signed.)				
Section 7. Life Insurance Held	(Give face amount and cash surrender val	ue of policies, name of insurance company	y, and beneficiaries.)				
statements made in order to determ	Small Business Opportunity Office at nine whether I meet the personal net be and correct to the best of my belief.	worth guidelines for participation in R					
Printed/Typed Name:		Signature and Date:					
County of State of							
Subscribed and sworn before	me this day of	·					
Sianed							
<u> </u>	Signed(Notary Public)						
	(Address of Notary)						
	(Address of Hotaly)		NOTARY SEAL HERE				