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 \$30.72 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 \$2.047 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.

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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@RTDDenver.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.



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.

All firms 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).
П	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.



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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.

Арр	lication Type	How Did You Hear About RT	D's SBE Program?			
	New Application	☐ I am Recertifying	☐ RTD Website	Community Event:		
	1 Recertification	☐ Word of Mouth	Other			
1.	Name of Firm				2. EIN	
3.	Physical Address		City	St	ate Zip	
4.	Mailing Address (if different)	1	City	C+	ate Zip	
Γ.	Mailing Address (ii differenc)	!	City	30	ate Zip	
5.	Owner Name			6.	Business Phone	
7.	Email		8. Web	site		
9.	Type of Ownership (Check o	ne)				
		☐ Partnership	Limited Liability		Corporation	
10.	Date Established	11. Da	ate Incorporated/Organ	ized 12.	. State of Incorporation	
13.	Nature of the Firm's Work	I		I		
14.	Primary Owner's Citizenship,	Ethnicity and Gender				
17.	Trimary Owner's Guzenship,	Lumber, and Gender				

RI	П	D

Citizenship	Ethnicity			Gen	nder	
☐ US Citizen	☐ Black	: 🗖 Hispa	nic		☐ Fe	emale
☐ Lawful Permanent Resident	☐ Subc	ontinent Asian 🗖	Native American		☐ Ma	ale
☐ Other (Explain)	☐ Asiar	Pacific (Other		☐ Ot	ther
	☐ Cauc	asian				
15. Ownership Details						
If you indicated Sole Proprietor in Qu	estion 10, pleas	e provide the follo	wing information:			
Name			Social Security Numb	er		# of Years as Owner
If you indicated Partnership, Limited	Liability Compa	ny (IIC) or Corno	ration in Ouaction 10	places provide the	followir	ag information (attach additional
pages if needed):	Liability Compa	ny (LLC), or Corpc	ration in Question 10,	please provide trie	HOHOWII	ig information (attach additional
Name	Boa	ard/Management Position	Number of Shares Held	Ownership %		Date Acquired
		1 0310011	Shares ricia			
Total Number of Shares Issued	'	Total Nu	mber of Shares Outsta	nding		
16. Is the firm owned in full or in part by	another compa	ny?				
☐ Yes ☐ No						
☐ Yes ☐ No						
(If yes, on a separate sheet, list the	parent company	s owners, percer	tage held by each, an	d the names and a	ddresse	s of its directors and officers. If
minorities, please indicate.)						
17. Identify any individual named in ques firm that has an ownership interest employees, equipment, or financing.	in or present b	ousiness relationsh	nip with the firm. Pre			
	<u> </u>	<u> </u>				

18. Have there been any transfers/changes of ownership in the past two years?



Yes	No	(If yes, explain on a separate sheet.)

	Name	Relationship to owners	Title
inancial Decisions			
stimating			
1arketing/Sales			
lire/Fire Personnel			
Purchasing Major Equipment/Supplies			
Supervision of Field Operations			
obs the Company Selects			
furety and/or Performance Bonds			
nsurance			
Checking Account Signature authority			
legotiating and Signing Contracts			
Were any of the individuals listed abo	ve on another company's payroll conc	 urrent with employment with the applican	 t firm?

Revenue Service (IRS) and going back three previous years, provide the gross receipts figures as they were reported on the federal income tax returns. Also, provide the total number of employees for each year.

Tax Year

Gross Receipts

of Employees

RID

Does the company own/lea sheet, by type and quantity	ise the equipment necessary .)	to provide the essent	ial functions of its business	e? (List owned/leased equipm	ent on s
☐ Yes ☐ No					
List all certifications (DBE, I	4BE, WBE, ESB, SBE, etc.) th	e firm has received &	years certified. (Please prov	vide copies of certification lette	ers.)
Has the firm ever been den	ied certification by a governm	nent agency? (If yes,	provide copies of all such de	enial letters and any appeal de	cisions.)
☐ Yes ☐ No					
Has any individual named i explanation on a separate a		an owner or manager	with a firm that has been d	enied certification? (If yes, pl	lease pro
☐ Yes ☐ No					
List the three (3) largest c business references with co		ation completed by the	e firm. If the firm does no	t perform contract-based wor	k, provid
Contract With	Contact Person	Phone Number	Contract Amount	Type of Work	
	es does the business provide?			ı/naics/.	
NAICS Code		N	AICS Code Descriptor		



The undersigned also states that they have the authority to execute the affidavit and does so as his or her free act and deed.

The undersigned also affirms that:

- 1. The business can perform all listed services in a professional and competent manner; and 2. The business has legal access to all listed products and can provide them in a timely manner; and
- 3. The business is operating within the following SBE Program guidelines:
 - The average annual gross revenues for the business for the past 3 years are less than \$30.72 million; and
 - The personal net worth of the qualifying owner(s) of the business is less than \$2.047 million, not including the equity in their primary residence and in the applicant business.

Any fraud or misrepresentation concerning information provided in the application will result in revocation of the application and/or certification and may result in the maximum legal prosecution allowed by prevailing statutes.

As a participant in the RTD SBE Program, I promise to notify the RTD Small Business Opportunity Office; SBO@RTDDenver.com, within thirty (30) days in writing of:

· Any changes to ownership, location, contact information and/or service offerings by the business; and

I understand that this RTD SBE certification may be investigated, audited, suspended, or revoked at any time for cause at the

• Any change of the financial status of the business or qualifying owner(s) that would violate the financial guidelines of the RTD SBE Program as outlined above.

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	ıl assets only; j	ointly-h	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 (Cents)
Cash on Hand and in Banks		\$_			12	.Accounts Payabl	e			\$
2.Savings Accounts		\$			_13	. Notes Payable t	o Banks a	and Othe	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	B.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		\$								
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	uency nly, 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
			\$			\$				\$
			\$			\$				\$
			\$			\$				\$
			\$			\$				\$
		ļ	Ψ		!	₹-		<u> </u>		Ť

25. Other Income		\$							
Section 1 Notes Payable to Banks and Others (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)									
Name and Address of Noteholder(s)		Original Balance		Current Balance	Payment Amount	Frequ (month	iency ily, etc.)		ured or Endorsed Type of Collateral
		\$		\$	\$				
		\$		\$	\$				
		\$		\$	\$				
Section 2 Stocks and Bonds (Jse atta	chments if nec	essar	y. Each attachmen	t must be identified	as part of	this statem	ent and signed.)	
Name of Securities	Number of Shares Held			Cost	Market Vali Quotation/Excl			Date of on/Exchange	Total Current Value
			\$		\$				\$
		\$			\$				\$
			\$		\$				\$
			\$		\$				\$

1

CONFIDENTIAL

Property A Property B Proper									
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									

Section 4.	Other Personal Property and Other Assets (Describer payment; if delinquent, describe delinquency. Use attachments if necessary							
Section 5.	Unpaid Taxes (Describe in detail as to type, to whom payable, a	mount and date due, and to what p	property, if any, a tax lien attaches.)					
Section 6.	Other Liabilities (Describe in detail. Use attachments if necessary	ary. Each attachment must be iden	tified as part of this statement and signed.)					
Section 7.	Life Insurance Held (Give face amount and cash surrender value	ue of policies, name of insurance co	mpany, and beneficiaries.)					
statements n	is form, I authorize the Small Business Opportunity Office at nade in order to determine whether I meet the personal net vese statements are true and correct to the best of my belief.							
Printed/Typed	Name:	Signature and Date:						
County of	State of							
Subscribed and sworn before me this day of ,								
Signed	Signed (Notary Public)							
	(Address of Notary)							
			NOTARY SEAL HERE					