



# SAN DIEGO COMMUNITY COLLEGE DISTRICT

City College • Mesa College  
Miramar College • Continuing Education



## S/D/M/W/DVBE CERTIFICATION VERIFICATION FORM

The SDCCD Propositions S & N Outreach Program is in place to promote and monitor the participation of **Small Businesses Enterprises, Disadvantaged Business Enterprises, Minority-owned Business Enterprises, Woman-owned Business Enterprises, Service-Disabled and Disabled Veteran-owned Business Enterprises** in construction bond program projects. Completion of this form is requested to assure transparency and the reporting of accurate S/D/M/W/DVBE utilization statistics to the District’s Board of Trustees and Citizens’ Oversight Committee. This form is to be completed by **all** certified contractors, consultants and vendors, and **all** firms seeking S/D/M/W/DVBE self-certification.

**PLEASE WRITE LEGIBLY AS INFORMATION THAT CANNOT BE READ CANNOT BE ADDED INTO THE DISTRICT’S DATABASE**

Fillable format available at <http://public.sdccdprops-n.com/Contractors/ContractorsDoc/SDCCDCertificationForm.pdf>

### SECTION I - CONTACT INFORMATION

Legal Business Name \_\_\_\_\_

DBA (if different than LBN) \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Website: \_\_\_\_\_ Email: \_\_\_\_\_

Business Type (Professional Services or Contractor): \_\_\_\_\_

Principal office of the business is located within San Diego County Yes \_\_\_\_\_ No \_\_\_\_\_

### SECTION II – CERTIFICATION VERIFICATION - To be completed by **currently certified** S/D/M/W/DVBEs

Please check below if you currently hold any of the following certifications filed with the California Department of General Services, the California Unified Certification Program **OR** any CUCP participating agency. A list of approved agencies is available at [http://public.sdccdprops-n.com/Contractors/ContractorsDoc/ACAP\\_Directive.pdf](http://public.sdccdprops-n.com/Contractors/ContractorsDoc/ACAP_Directive.pdf). **Please identify the certifying agency, certification identification number, and expiration date in the blanks below and include a copy of your certification documentation with the submission of this form to assist with confirmation of certification status.**

#### Small Business Enterprise (SBE) Certifications

California Department of General Services (DGS)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Central Contractor Registry (CCR)

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

Los Angeles County Metropolitan Transportation Authority (METRO)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

City of Los Angeles

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Disadvantaged Business Enterprise (DBE) Certifications**

California Unified Certification Program (CUCP - CALTRANS)

Firm I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Central Contractor Registry (CCR)

*(For Self-Certified Small Disadvantaged Business, Economically Disadvantaged Woman Owned Small Business (EDWOSB) or 8(a) certifications)*

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

Los Angeles County Metropolitan Transportation Authority (METRO)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

City of Los Angeles

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Minority Business Enterprise (MBE) Certifications**

California Unified Certification Program (CUCP - CALTRANS)

*(For State Minority Business Enterprise (SMBE))*

Firm I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Central Contractor Registry (CCR)

*(For Minority Owned Business self-certifications)*

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

Los Angeles County Metropolitan Transportation Authority (METRO)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

City of Los Angeles

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Woman-owned Business Enterprise (WBE) Certifications**

California Unified Certification Program (CUCP - CALTRANS)

*(For State Woman-owned Business Enterprise (SWBE))*

Firm I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Central Contractor Registry (CCR)

*(For Woman Owned Business, Woman Owned Small Business (WOSB), or Economically Disadvantaged Woman-Owned Small Business (EDWOSB) self-certifications)*

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

Los Angeles County Metropolitan Transportation Authority (METRO)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

City of Los Angeles

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

## Disabled Veteran Business Enterprise (DVBE) Certifications

California Department of General Services (DGS)

Certification I.D. # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Department of Veteran Affairs (VA)

(For Service-disabled Veteran-Owned Small Business (SDVOSB))

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

Central Contractor Registry (CCR)

(For Service-disabled Veteran-owned Small Business (SDVOSB) self-certifications)

DUNS # \_\_\_\_\_ Registration Valid Through: \_\_\_\_\_

### SECTION III – LICENSES

Please list **all** construction licenses, specialty classifications or certificates held: \_\_\_\_\_

### SECTION V – SELF-CERTIFICATION

This section is for firms seeking **self-certification**. Please review the certification definitions provided on pages 6-7 before filling out the following section. Please also review the list of certifying agencies and certifications approved for the program at [http://public.sdccdprops-n.com/Contractors/ContractorsDoc/ACAP\\_Directive.pdf](http://public.sdccdprops-n.com/Contractors/ContractorsDoc/ACAP_Directive.pdf). You are encouraged to include documentation to corroborate eligibility. All information will be reviewed and validated before your firm is included in the SDCCD Certification Verification Database.

I affirm I have reviewed the certification definitions and list of approved certification agencies/resources.

1. Has your firm submitted an application for certification within the last three (3) years? Yes \_\_\_\_\_ No \_\_\_\_\_

a. Agency: \_\_\_\_\_ Date: \_\_\_\_\_

b. Certification Type:

- SBE:** Small Business Enterprise
- DBE:** Disadvantaged Business Enterprise
- MBE:** Minority Business Enterprise
- WBE:** Women Business Enterprise
- DVBE:** Disabled Veteran Business Enterprise

2. Has your firm ever been denied certification by a public agency? Yes \_\_\_\_\_ No \_\_\_\_\_

a. Agency: \_\_\_\_\_ b. Date: \_\_\_\_\_

b. Certification Type:

- SBE:** Small Business Enterprise
- DBE:** Disadvantaged Business Enterprise
- MBE:** Minority Business Enterprise
- WBE:** Women Business Enterprise
- DVBE:** Disabled Veteran Business Enterprise

c. Basis for rejection/denial: \_\_\_\_\_

\_\_\_\_\_

If self-certifying as a **MBE**, please specify the appropriate ethnic minority group.

- African American**
- Hispanic American**
- Native American**

- Asian-Pacific American
- Subcontinent Asian American

If self-certifying as a **DBE**, please specify the appropriate group membership.

- African American
- Hispanic American
- Native American
- Asian-Pacific American
- Subcontinent Asian American
- Women

If self-certifying as a **SBE**, please affirm that your firm’s combined gross annual receipts (and affiliates) average no more than \$14 million over the three (3) previous years.

- The statement above is true.

If self-certifying as a **WBE**, please affirm that you and/or other women own no less than 51 percent of the business concern for which certification is sought; **and** that management and daily business operations are controlled by one or more female owners. In the case of a corporation, 51 percent of the stock must be owned by one or more such individuals.

- The statement above is true.

If self-certifying as a **DVBE**, please affirm that you have received an Entitlement Letter from the U.S. Department of Veteran Affairs (800-827-1000) or Department of Defense (800-321-1080). Please include a copy of the letter to corroborate eligibility.

- The statement above is true.

If self-certifying, please affirm that the applicant’s management and daily business operations are controlled by:

\_\_\_\_\_ (Name) \_\_\_\_\_ (Title)

**SECTION V - AFFIDAVIT**

I hereby certify under penalty of perjury under the laws of the State of California that I have read the certification form and know the contents thereof, and that the business category and certification information indicated above are true and correct in accordance with Title 2, California Code of Regulations, U.S. DOT Title 49, Code of Federal Regulations, Part 26; U.S. Small Business Administration and U.S. Department of Veteran Affairs, pertaining to small, disadvantaged, minority-owned, women-owned, and disabled veteran business enterprises. I understand that falsely certifying the status of this business, obstructing, impeding or otherwise inhibiting any San Diego Community College District office who is attempting to verify the information on this form may result in suspension from participation in San Diego Community College District business contracts for a period up to five (5) years and the imposition of any civil penalties allowed by law.

INFORMATION FURNISHED BY:

\_\_\_\_\_ (Name of Business)

By: \_\_\_\_\_ (Print Name) \_\_\_\_\_ (Title)

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

Please provide a copy of this form and all required documentation to Ursula Kroemer, SDCCD Outreach Coordinator, at [ukroemer@sdccd.edu](mailto:ukroemer@sdccd.edu) or fax to (619) 388-6509. It may also be mailed to SDCCD Facilities Management, 3375 Camino del Rio South, San Diego, CA 92108, attn: Ursula Kroemer.

Please note this form is a **required document** for all public bids, and a hard copy must be included in your bid to be considered responsive.

# Text Message Notification Campaign Opt-In Document

The San Diego Community College District is committed to promoting opportunities for small and underutilized businesses by now offering the ability to be notified via text message reminders of the following:

- Bid Walks
- Requests for Proposals
- Etc, etc, etc, etc

The SDCCD will **not** distribute this data with any other person or entity and it is to be used for **communications functions only**.

If at any point you would like to opt out of receiving text message notification please send an email to [aschweizer@gafcon.com](mailto:aschweizer@gafcon.com) with SMS NOTIFICATION OPT OUT in the subject line and you will be removed from the notification group.

*Please fill out the bottom portion of the form **COMPLETELY** and sign at the bottom*

Point of Contact Name (First and Last) \_\_\_\_\_

Point of Contact Title \_\_\_\_\_

Point of Contact Company \_\_\_\_\_

Point of Contact Phone number (in XXX-XXX-XXXX format) \_\_\_\_\_

Cell Carrier (Verizon, AT&T, etc) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## SMALL AND HISTORICALLY UNDERUTILIZED BUSINESS DEFINITIONS:

<http://public.sdccdprops-n.com/Contractors/Pages/Outreach.aspx>

### Disadvantaged Business Enterprise (DBE)

- The firm must be at least 51% owned by one or more socially and economically disadvantaged individuals.
- The firm must be an independent business, and one or more of the socially and economically disadvantaged owners must control its management and daily operations.
- Only existing for-profit "Small Business Concerns," as identified by the Small Business Act and Small Business Administration (SBA), may be certified. DBE applicants are first subject to the applicable small business size standards of the SBA. Second, the average gross receipts for the firm (include its affiliates) over the previous three fiscal years must not exceed the U. S. Department of Transportation (DOT) cap of \$20.41 million.
- The Personal Net Worth (PNW) of each socially and economically disadvantaged owner must not exceed \$1.32 million, excluding the individual's ownership in interest in the applicant firm and the equity in his/her primary residence.

Socially and economically disadvantaged individual means any individual who is a citizen or lawfully admitted permanent resident of the United States and who is a member of the following groups:

- African American
- Hispanic American
- Native American
- Asian-Pacific American
- Subcontinent Asian American
- Women
- Any individual found to be social and economically disadvantaged on a case-by-case basis by certifying agency pursuant to the standards of the U.S. DOT 49 CFR Part 26.

**Reference:** California Department of Transportation

[http://www.dot.ca.gov/hq/bep/downloads/Word/Application for Regular DBEs 2.22.08.doc](http://www.dot.ca.gov/hq/bep/downloads/Word/Application%20for%20Regular%20DBEs%202.22.08.doc)

### Minority Business Enterprise (MBE)

"Minority-owned business" means (1) a business enterprise (a) that is at least 51% owned by a minority individual or group(s) or (b) if a publicly owned business, at least 51% of the stock of which is owned by one or more minority groups, and (2) whose management and daily business operations are controlled by one or more of those individuals. The contracting utility shall presume that minority includes, but is not limited to, Black Americans, Hispanic Americans, Native Americans, Asian Pacific Americans, and other groups.

**Reference:** California Public Utilities Commission

[http://162.15.7.24/PUBLISHED/GENERAL\\_ORDER/59939.htm](http://162.15.7.24/PUBLISHED/GENERAL_ORDER/59939.htm)

### Disabled Veteran-Owned Business Enterprise (DVBE)

For DVBE certification purposes, a "disabled veteran" is:

- A veteran of the U.S. military, naval or air services; and
- The veteran must have a service-connected disability (*See documentation requirements below*)

To be certified as a DVBE, the firm must meet the following requirements:

- The firm must be at least 51% owned, managed and operated by one or more disabled veterans, or
- Daily business operations must be managed and controlled by one or more disabled veterans.

**Reference #1:** CA Department of General Services (DGS) – Office of Small Business & Disabled Veteran Business Enterprise Services

<http://www.dgs.ca.gov/pd/Programs/OSDS/DVBEEligibilityBenefits.aspx>

*(Requires documentation of service-connected disability of at least 10% or more)*

**Reference #2:** U.S. Department of Veteran Affairs

<http://www.vetbiz.gov/vip/eligible.htm>

*(Requires possession of disability rating letter issued by the Department of Veterans Affairs, establishing service-connected disability between 0-100% or a disability determination from the Department of Defense)*

### **Service Disabled Veteran-Owned Small Business Enterprise (SDVOSB)\***

For certification purposes, firm must be must be classified as a small business concern in accordance with The U.S. Small Business Administration. [SBA size standards 2007.PDF\(252kb\)](#). To qualify as a SDVOSB, firm must meet the following requirements:

- Not less than 51% of which is owned by one or more service-disabled veterans, or in the case of any publicly owned business, not less than 51% of the stock of which is owned by one or more service-disabled veterans; and
- The management and daily business operations of which are controlled by one or more service-disabled veterans, or in the case of a veteran with a permanent and severe disability, a spouse or permanent caregiver of such veteran.

**Reference:** U.S. Department of Veteran Affairs

<http://www.vetbiz.gov/vip/eligible.htm>

### **Small Business Enterprise (SBE)**

In order to be considered a “small business” as determined by the State of California, businesses must meet these eligibility requirements:

- Must be independently owned and operated;
- Cannot be dominant in its field of operation;
- Must have its principal office located in California;
- Must have its owners (or officers in the case of a corporation) domiciled in California; and
- Together with its affiliates, be either:
  - A business with 100 or fewer employees and an average annual gross receipts of \$14 million or less (over the previous three tax years), or
  - A manufacturer with 100 or fewer employees.

**Reference:** California Department of General Services

<http://www.pd.dgs.ca.gov/smbus/sbcert.htm>

### **Women Business Enterprise (WBE)**

A for-profit business concern whose daily management is controlled by one or more individuals who are women; **and** the business is at least 51 percent owned by one or more individuals who are women. In the case of a corporation 51 percent of the stock must be owned by one or more such individuals

**Reference:** California Department of Transportation

[http://www.dot.ca.gov/hq/bep/downloads/Word/SMBE\\_Cert\\_App.doc](http://www.dot.ca.gov/hq/bep/downloads/Word/SMBE_Cert_App.doc)