



# City of Austin

*Founded by Congress, Republic of Texas, 1839*

*Small & Minority Business Resources Department, Certification Office, 4201 Ed Bluestein Blvd. Austin, TX 78721*

*Mailing Address: PO Box 1088, Austin, TX 78767-1088, Telephone (512) 974-7645*

## **MBE / WBE PROGRAM APPLICATION – STATEMENT OF ETHNICITY**

I, \_\_\_\_\_ majority owner of

*(Printed MBE/WBE Owner's Name*

\_\_\_\_\_*(Business Name)*, certify that I am

eligible for the City of Austin's Minority-Owned Business Enterprise (MBE) and Women-Owned Business Enterprise Procurement Program as a minority person, as defined in Ordinances 2-9A-4 (32), 2-9B-4 (32), 2-9C-4 (32 ) an d 2-9D-4 (33). I have applied for MBE/WBE certification and the documentation submitted to confirm my ethnic origin was not conclusive in accordance with the Small and Minority Business Resources (SMBR) department and the City of Austin standards. Should SMBR receive a third party challenge, I certify that I am a member of the qualifying ethnicity below:

*Please check your ethnic identification:*

  

Asian – American

Hispanic

  

Black or African – American

Native American

Per Department Rule 2.5., I affirm I have held myself out to be a member of the above indicated group over a long time prior to applying for certification, and that I am regarded as a member of the group by the relevant community.

I acknowledge that, according to the City of Austin's MBE/WBE Ordinance, a person who intentionally applies as a MBE/WBE for an award of a City of Austin contract and who intentionally does not meet the definition of a MBE/WBE may receive sanctions. I furthermore certify under penalty of sanctions, the above and foregoing information, including all requested documentation, is a true and correct statement that substantiates this business's MBE/WBE eligibility.

\_\_\_\_\_  
Signature of Qualifying Applicant

\_\_\_\_\_  
Date

### **Notary Certificate**

State of Texas, County of \_\_\_\_\_. Sworn to and subscribed before me on the \_\_\_\_\_ day of \_\_\_\_\_, year \_\_\_\_\_.

\_\_\_\_\_  
Notary Public/ Seal