

Office of Business Diversity & Compliance

DIVISION OF FINANCE

The Office of Business Diversity & Compliance 125 North Main, Room 546 Memphis, TN 38103 Office: (901) 636-6210 Fax: (901) 636-6560

AFFIDAVIT OF APPLICANT FOR EQUAL BUSINESS OPPORTUNITY PROGRAMS

By executing this Affidavit under oath, I, the undersigned, as an applicant for the City's EQUAL BUSINESS OPPORTUNITY (EBO) programs, understand and agree to the following terms and conditions:

A FALSE STATEMENT OR MATERIAL OMMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL FROM THE OFFICE OF BUSINESS DIVERSITY AND COMPLIANCE AND MAY RESULT IN THE INITIATION OF DEBARMENT FROM THE CITY'S EQUAL BUSINESS OPPORTUNITY (EBO) PROGRAM AND REMOVAL FROM THE OFFICE OF BUSINESS DIVERSITY AND COMPLIANCE REGISTRY/REGISTRIES.

The following are additional grounds for removal from the EBO registry/registries:

- The business has changed to the extent that the business is no longer beneficially owned and controlled by minority persons or women;
- An indictment or conviction of the owner(s) or business for criminal offense related to obtaining, attempting to obtain or performing a public or private contract;
- Evidence that the business lacks business integrity and honesty. Such evidence may include initiation or completion of debarment proceeding against the business by a government agency;
- The business has had its eligibility as a MBE or WBE revoked by another government certifying program.

I understand and recognize that the information submitted in this application is for the purpose of being identified in the OFFICE OF BUSINESS DIVERSITY AND COMPLIANCE (OBDC) REGISTRY/REGISTRIES and having my participation counted as an MBE or WBE, in City and City related contracts. I understand that the Office of Business Diversity and Compliance may, by means it deems appropriate, determine the accuracy and truth of the statements in this application. I authorize the Office of Business Diversity and Compliance or its designee(s) to contact, without limitation, any entity, individual, contractor(s), and client(s) for the purpose of verifying the information submitted and determining my eligibility for the Office of Business Diversity and Compliance registry/registries.

I further agree and understand the on-going obligation to fully cooperate with the OBDC and provide upon request, all information necessary to assist the OBDC in assessing the continuing validity of my firm's status as a bona fide MBE and/or WBE and in determining the commercial usefulness of my service/supply effort as a MBE and/or WBE on City contracts, and to notify the OBDC of any changes that might affect the firm's status as a MBE or WBE.

I				(Full Name Printed), Affirm under Penalty of (Title)
Law	that	I	am	
				(Applicant Firm Name) and that I have reac
and st true ar compl	atemennd correcte. I	t subnect to the hereby	nitted in the best y verify	questions in this application and that all of the foregoing information this application and its attachments and supporting documents are of my knowledge, and that all responses to the questions are full and that I am over the age of 18, and am duly authorized to sign this pplicant's firm.
Signat				ent, Member, Partner, Majority Owner(s)
Date:				
			SUBSC	CRIBED before me, Notary Public for Said State and County, this
				Notary Public
My Co	ommiss	ion Ex	apires:	