CERTIFICATIONS
FOR WOMEN & MINORITY-OWNED BUSINESSES
(Appendix E)

This form must be filled out individually by each entity seeking certification (i.e., developer, contractor, applicant, etcetera.)

Applicant Name:

Certification Type:

Diverse ownership type (e.g., minority-owned, women-owned, veteran-owned, etc.)

Certification Proof:

Identify business certification type (e.g., MBE, WOSB, LGBTBE, etc.)

Certifying Body:

Identify certifying body (e.g., National Minority Supplier Development Council, NGLCC, Women's Business Enterprise National Council, National Veteran-Owned Business Association, etc.)

Certification Date:

Expiration Date (if applicable):

I, _____, hereby certify that the information provided herein is true and accurate to the best of my knowledge.

Signature: _____

Attach a Certificate from a recognized certifying body as proof of diverse business ownership type.