



State of Delaware
Office of Supplier Diversity
Email: osd@delaware.gov
Web site: <http://business.delaware.gov/osd/>

Recertification Affidavit
For (Check all certifications that apply)

Diverse Business (OSD) Certification

Small Business Focus (SBF) Certification

I, _____, (business owner) do solemnly swear that there has not been a change in the operational control, management control, ownership of my firm, or in any of the required documentation submitted to the State of Delaware since my last certification approval by the Office of Supplier Diversity (OSD), except those changes I have reported to OSD and those documents I have enclosed with this affidavit.

The business known as _____ is a

Veteran Minority Women Service Disabled Veteran Individual with Disability Business

Small Business with a FEIN/tax ID# of _____

The gross receipts and number of people (FTEs) employed by of my firm and affiliates during the last three years are: **(Required for SBF certification)**

Year Ending	Gross Receipts	FTE
(A)		
(B)		
(C)		

Signature of Owner _____ Date _____

Name: _____ Title: _____

Company Physical Address: _____

Phone: _____ Company Email: _____

Owner's Email: _____

Other Contact Email: _____

Website: _____

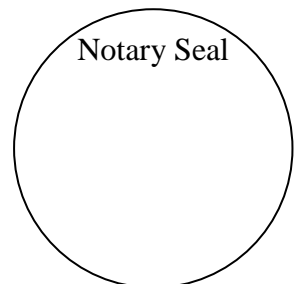
On this _____ day of _____, 20____ before me appeared (owner) _____ to me personally known, who being duly sworn, did execute the foregoing affidavit, and did state that he/she was properly authorized by (firm) _____ to execute the affidavit and did so as a free act and deed

NOTARY PUBLIC IN AND FOR THE

Signed

County of _____ State of _____

My Commission Expires _____



Diverse Business (OSD) / Small Business Focus (SBF) Recertification Affidavit Instructions

Your company's certification with the State of Delaware will expire shortly. To apply for recertification, you must submit the enclosed Recertification Affidavit dated no longer than 60 days after the expiration date on your original certification letter. It is imperative that the Affidavit and applicable materials listed below are returned in a timely manner to the Office of Supplier Diversity, 820 N. French Street, 10th Floor, Wilmington, DE 19801, osd@delaware.gov or (fax) 302-736-7915.

Please **submit/attach the following information:**

- Products or services description in text box on page three (to expedite the posting of this information on OSD's web site; please e-mail the information to osd@delaware.gov. Please include updated description in the body of email.
- Signed & notarized Affidavit
- Current licenses (such as a Delaware Business License and any DE professional or DE trade licenses related to the goods or services offered, these should be in the name of the 51% owner(s))
- Verification of any major changes since last certification
- **Required for OSD:** Current home state certification, if out-of state•
- **Required for SBF:** Last three years of your firm's tax returns (gross receipts). Only the first page is necessary for each year.

Please also submit the following documents, **IF THEY HAVE CHANGED** since your last certification or recertification. If there are no changes, please indicate such in a cover letter.

- All corporate or partnership documents that have changed (i.e., stock ledger, minutes of most recent meeting where elections were held, etc.)

Failure to return the completed Affidavit along with the required information will indicate to the OSD that you are not seeking recertification.

In the future, to regain certification, you will be required to submit a new application. If you have any questions, please contact the OSD at osd@delaware.gov or 302-577-8477.

Additional Questions (only if changes are made):

Describe, in detail, what product(s) and/or services your business provides. Include a list of KEYWORDS that a buyer would search to find your goods or services. Please note the below capabilities narrative will be posted on the OSD web site. (use up to 2,500 characters including space and punctuation) Use a separate sheet if needed (please do not only provide a capabilities statement or brochure). If left blank, the description already included in the OSD & SBF online Directory will be used.

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Six digit North American Industry Classification System ([NAICS](#))¹ Code(s):
(To assist you in determining your NAICS Code(s) go to www.census.gov/naics) If left blank, the NAICS codes already included in the OSD & SBF online Directory will be used.

1.	2.	3.	4.	5.	6.
7.	8.	9.	10.	11.	12.

¹ [North American Industry Classification System \(NAICS\)](#) is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. A NAICS code has 6 digits. The first 2 to 3 digits are used to identify the industry for the Small Business Focus Program. You can review NAICS at: <http://www.census.gov/naics/>

Small Business Focus (SBF) Required:

SBF Definitions:

Industries	NAICS sectors* (initial code numbers)	eligibility and graduation point size caps	
		FTE (full time equivalents)	Gross sales
		Based upon a 3 year average	
Architecture & Engineering Services	541 237	none	< \$3,500,000
Construction	23	< 250	< \$7,000,000
Manufacturing	31 32 33	< 250	none
Retail	42 44 45	< 25	< \$3,500,000
Service	various	< 50	< \$3,500,000
Wholesale	42	< 50	none

Identify the SBF Industries that you seek re-certification under? (check all that apply)

<input type="checkbox"/> Architecture & Engineering Services	<input type="checkbox"/> Retail
<input type="checkbox"/> Construction	<input type="checkbox"/> Service
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Wholesale

Optional:

For all companies
How many years has your company been conducting business with you as owner?
How many contracts, subcontracts, and/or sales has your company completed during the last 12 months?
What is the largest contract, subcontract, or sale your company completed in the past 24 months?
Has your company done any business with government? <input type="checkbox"/> No; <input type="checkbox"/> Yes
If yes, what level of government (check all that apply): <input type="checkbox"/> Federal; <input type="checkbox"/> State; <input type="checkbox"/> Local
Has your company done any business with government in the State of Delaware? <input type="checkbox"/> No; <input type="checkbox"/> Yes
Number of government contracts, subcontracts, or sales completed (estimate):
For Construction-Related Companies Only (not including suppliers of construction materials)
What is your company's bonding capacity? \$ (indicate "unknown" if you do not know)
What % of your business is direct contracting?
What % of your business is subcontracting?