



## CERTIFICATION DOCUMENT CHECKLIST

Please include all support documents with your application

Failure to do so delays the certification review process

Please include this checklist for easier processing

Firm Name:		SBD Use Only
<input type="checkbox"/>	1. CSBE Personal Financial Statement (Construction Firms Only) (See Section #11 of Application) <input type="checkbox"/> N/A	<input type="checkbox"/> Submitted
<input type="checkbox"/>	2. Copies of signed corporate federal tax returns), including all schedules for the last three (3) years or number of years a firm and/or affiliates have been in business. For sole proprietor, copies of individual tax returns for the last 3 years or number of years firm and/or affiliates have been in business, or a copy of Form 7004 (If Wholesaler/Manufacturer see #12)	<input type="checkbox"/> Submitted <input type="checkbox"/> Submitted - Affiliates
<input type="checkbox"/>	3. Proof of Business Structure- Corporation/ LLC/Partnership/ Sole Proprietorship (See Section 3) (Article of Incorporation, Stock Certificate (front and back); Stock Ledger, Corporation Meeting Minutes)	<input type="checkbox"/> Submitted (Sunbiz Report)
<input type="checkbox"/>	4. Qualifier is an owner: CBE - 25% CSBE - 10% Micro/SBE - 10%	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	5. Picture ID for each owner (driver's license)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	6. Resume(s) for all Owners and/ or Corporate Officers/Key Personnel (See Section #12 of Application)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	7. Copies of all current Miami-Dade County and municipality Local Business Tax Receipt (formerly Occupational License), individual, and firm if the firm is a professional association (e.g. accountant, architect, engineer)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	8. Copies of current State and/ or local Certificate of Competency (front and back) from Miami-Dade County, contractor's professional license.	<input type="checkbox"/> Submitted
<input type="checkbox"/>	9. Firm name and address match Local Business Tax Receipt	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	10. Copy of current Technical Certification (Professional categories, land surveyors, mapping, geologist, etc.-CBE certifications ONLY)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	11. CBE/CSBE: Office located in Miami-Dade County (Current lease/sub-lease agreement, purchase or settlement agreement (for primary residence) or copies of warranty deed (home based businesses) Micro/SBE: Office located Miami-Dade County (current lease/sub-lease agreement, purchase or settlement agreement (for primary residence) or copies of warranty deed (home based businesses)	<input type="checkbox"/> Y <input type="checkbox"/> N If No, Where is Office Located? _____
<input type="checkbox"/>	12. Current Lease Agreement, Purchase Agreement, or Copy of Warranty Deed to show ownership of property	<input type="checkbox"/> Submitted
<input type="checkbox"/>	13. Commodity codes for each trade category specific to license and/or technical certification	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	14. Copy of manufacturers or wholesalers most recent Florida Department of Revenue Employer's Quarterly Report-Form UCT-6 (Goods & Services Only)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	15. All affiliate documents (See Section #13 of Application) Notarized Statement on firm's letterhead for each owner indicating ownership and/or financial inter in another firm (to include non-profit organizations). Please provide 3 years corporate tax return for each affiliate. _____ _____ <input type="checkbox"/> N/A	<input type="checkbox"/> Submitted (Sunbiz report for all entities in file)
Comments:		