

Missouri
Department
of Transportation



Patrick McKenna, Director

External Civil Rights Division
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DISADVANTAGED BUSINESS ENTERPRISE NO CHANGE AFFIDAVIT

This annual update form is required by MoDOT in order to keep your DBE eligibility status. **When submitting this form you are required to enclose your previous years Business Income Tax Returns, and W3's, and any other documentation that supports the reported changes on this form.**

GENERAL INFORMATION

Name of Firm:		
Street Address:		
Mailing Address:		
City:	State:	Zip:
Owner of Firm:	Telephone Number:	
Are the firms NAICS codes accurate in the MRCC Directory?	YES	NO
Person preparing this application:	Title:	Owner's Email:
Circle the districts the firm is willing to travel to for work: Northwest Northeast Kansas City Central St. Louis Southwest Southeast		

OWNERSHIP

Items such as amendments to any corporate by-laws or partnership agreements, transfers or issuance of stock, changes in management personnel or corporate officers, etc. should be enclosed. Note: failure to disclose all information concerning the control and ownership of the firm may lead to decertification of the firm.

Attach additional sheets if necessary.

Have there been any changes in the ownership structure of the company in the past year?	YES	NO
Please check what structure the company is currently using below.		
Sole Proprietorship	Partnership	Corporation Other

List equipment purchased or leased in the past year with value greater than \$1,000.00 **(include new titles/lease docs)**

Type of Equipment	Make	Model	Year	Date Acquired	Present Value

List five largest contracts completed in past year.

Prime Contractor	Phone	Contract Amount	Project Name/Location	Type of Work Performed

PERSONAL NET WORTH INFORMATION

Have you acquired any personal assets or liabilities in the last year? YES NO

If answered "YES", list details below (i.e. transfers, real estate, gifts, stocks, bank accounts, etc.):

Description	Acquired/Sold	Names on Assets	Liabilities Against Asset	Value of Asset

CERTIFICATION AFFIDAVIT

We, the undersigned officers of the afore-mentioned firm agree to the following conditions:

To abide by all of the rules and regulations governing the certification process hereafter.

To notify the department within thirty days of any change in the ownership, control, management or status as an on-going concern. (Note: If, after filing this annual update, and prior to the expiration of your certification, there is any change in the ownership and/or management of this firm, you must notify the Missouri Highway and Transportation Department in writing within thirty days after the change. Failure to comply with this requirement may lead to a loss of certification.)

That the department has the right to conduct an on-site review of the firm's operations, as well as, audit and examine the company's books and review contracts, company structure, facilities and to request whatever additional information it deems necessary from time to time, in order to monitor the status of the company, if the firm is certified by the department as a bona-fide disadvantaged owned and controlled company.

I swear that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination because of my identity as a member of one or more of the groups identified in 49 CFR § 26.5, without regard to my individual qualities. I further swear that my personal net worth does not exceed \$1,320,000.00, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I specifically swear that the DBE firm listed on this application continues to meet the small Business Administration (SBA) business size criteria and the overall gross receipts cap of 49 CFR Part 26. I have provided the attached size and gross receipts documentation to support this affidavit.

Furthermore, the undersigned, swear under oath, the foregoing statements and application contents are true and complete, and include all material and information necessary to identify the firm as a Disadvantage Business Enterprise with the Missouri Department of Transportation, as well as identifying all current owners, directors, officers, or members of the firm.

That the department may automatically deny or rescind certification after applying its own procedures and may automatically deny or rescind certification if, during or after the certification process, it finds that the undersigned have submitted false, inaccurate, or misleading information.

Any material omission or misrepresentation will be grounds for terminating the eligibility of this firm as a certified or qualified DBE, as well as any contract which may have been awarded under those programs, and for initiating action under Federal and/or Missouri civil and/or criminal laws concerning false affidavits, false statements or declarations, perjury, fraud, stealing by deceit, or other applicable offenses. (Making a false affidavit is a misdemeanor. See Section 575.050, RsMo 1986.)

*Signature
 Printed name
 Title
 Date

*Signature
 Printed name
 Title
 Date

*Must be signed by at least one officer if a corporation; one disadvantaged partner if a Partnership; or the proprietor if a Sole Proprietorship.

State of _____)
 _____) ss.
 County of _____)

NOTARY PUBLIC

On this _____ day of _____, 20____, before me appeared, the undersigned notary public, personally appeared _____ known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Signed, _____,
 _____ (PRINT), Notary Public.

My Commission expires: _____

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