



**SMALL BUSINESS
ENTERPRISE PROGRAM**

*A Race and Gender Neutral Program With
No Geographical Boundaries*

SBE Recertification

*Established by Charleston County Council
Ordinance on September 4, 2007*

| | | | |
|--|--|---|--|
| Legal Name of Business: | | SBE Certification No: | |
| Business Physical Street Address: | | Mail Address (if different): | |
| Business Phone: () | | Fax No.: () | |
| Email Address: | <u>Be sure to advise us if your email address changes at any time. This will be our main line of communication.</u> | | |
| Business Web Site: | WWW. _____ | | |
| Has there been any change in ownership during the previous year (including changes in share distributions)? <input type="checkbox"/> NO <input type="checkbox"/> YES | | | |
| Current Legal Form of Enterprise: <u>Check all that apply</u> | | <u>State primary goods/services of this firm:</u> (description should match NAICS codes listed below) | |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Limited Liability Company | | |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Joint Venture | | |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Other (state) _____ | | |
| NAICS Codes (see www.naics.com for help) One for each of your primary goods/services (up to 5): | | | |
| Attach Required Documents: | | | |
| <ul style="list-style-type: none"> • Signed federal tax return for the preceding year (or "years" if certification has expired) • Current business license and any professional licenses/certifications required for the operation of the business, or for key employees performing functions which require licensing or certification • Articles of Incorporation (if any changes to ownership or legal structure) | | | |
| By my signature below, I certify that the information I have supplied on this form and the attached documentation is true and correct. | | | |
| Signature of Owner(s) or Principal(s) | Title | Date | |
| _____ | _____ | _____ | |
| _____ | _____ | _____ | |
| _____ | _____ | _____ | |
| _____ | _____ | _____ | |

RETURN TO:

HCHESSE@CHARLESTONCOUNTY.ORG
 CHARLESTON COUNTY PROCUREMENT
 4045 BRIDGE VIEW DRIVE, SUITE B250
 NORTH CHARLESTON, SC 29405
 PHONE: (843) 958-4753
 FAX: (843) 958-4758