



ANNUAL CERTIFICATION REVIEW

- ☐ DISADVANTAGED BUSINESS ENTERPRISE (DBE) ☐ SMALL BUSINESS ENTERPRISE (SBE)
- ☐ AIRPORT CONCESSION DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)

Name of Firm:			
Contact Person:			
Business Address: (No P.O. Box)			
Mailing Address (If different from mailing address)			
Business Phone:	()	Cell Phone:	()
Fax Number:	()	Email Address:	

REQUIRED DOCUMENTATION/ATTACHMENTS

- ☐ Federal Tax Returns for applicant firm (and all affiliates), including all schedules for the last year.

☐ Extension has been filed – A copy of the extension is required.

Please note that if an extension was filed and provided with the ACDBE/DBE review form last year, you must provide a copy of the tax returns from two years ago.

☐ N/A - No taxes were filed for last year as the firm has been operating for less than a year. The firm commenced operations on .
- ☐ No Change Declaration

NO CHANGE DECLARATION

I _____ (Individual's Name), declare that there have been no changes in _____'s (Firm Name) circumstances affecting its ability to meet the size standards, disadvantaged status, ownership, or control requirements of 49 CFR Part 23, Part 26 and 13 CFR Part 121. I further declare there have been no material changes in information provided with _____'s (Firm Name) application as a ☐ DBE or ☐ ACDBE (check applicable box), except for any changes that I have provided via written notice to the Clark County Department of Aviation pursuant to 49 CFR § 26.83(i).

DISADVANTAGED BUSINESS ENTERPRISE (DBE)

I declare 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 declare 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. In addition, I specifically declare that my firm continues to meet the Small Business Administration (SBA) business size criteria and overall gross receipts cap of 49 CFR Part 26. I specifically declare that the average annual gross receipts (as defined by SBA rules) over the previous three fiscal years do not exceed \$30.40Million. I provide the attached size and gross receipts documentation to support this declaration. I declare that under penalty of perjury that the foregoing is true and correct.¹

Signature

Date

AIRPORT CONCESSIONS DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)

I declare 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 declare 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. In addition, I specifically declare that my firm continues to meet the Small Business Administration (SBA) business size criteria and overall gross receipts cap of 49 CFR Part 26 and Part 23. I specifically declare that the average annual gross receipts (as defined by SBA rules) over the previous three fiscal years do not exceed \$56.42 Million. I provide the attached size and gross receipts documentation to support this declaration. I declare that under penalty of perjury that the foregoing is true and correct.¹

Signature

Date

¹ Knowingly and willfully providing false information to the Federal government is a violation of 18 U.S.C. Section 1001 (False Statements) and could subject you to fines, imprisonment or both.

NOTARY CERTIFICATE