

SMALL BUSINESS CERTIFICATION

In order to bid on Small Business Development Contracts let by the Iowa DOT, this form must be submitted ten days prior to the next letting and allows a contractor to self certify that their company meets the requirements of a Small Business as defined by Iowa Code 314.13(8).

| Cor | npany Name | Contact Name | 9 |
|---|---|---|--|
| Company Address | | Company Phone | e |
| City, State, and ZIP Code | | Company FAX | |
| Type of work cor | npany performs/NAICS code | e-Mail Address | |
| Please answer the fol | lowing five questions: | | |
| Is the primary ow | ner of the above-listed business | s a U.S. citizen? | YES NO |
| Is the business o | perated for profit under a single | management? | YES NO |
| What is the avera | age annual gross income for the | three preceding fiscal year | ars? |
| How many emplo | oyees work for this business? | | |
| provided in this Sr misrepresentation of action under federal a | the laws of the United States nall Business Certification ap information shall result in deni and/or state law concerning false | plication are true and al or revocation of certific | that all the statements correct. Any false of cation; and for initiating |
| State of | County of | | |
| Signed and sworn to (o | affirmed) before me on | | |
| D _V | | Date | |
| Ву | Name(s) of individual(s) making statement | t | |
| Signature of Notarial Officer | | Stamp | |
| Title of Office | | | |
| My commission expires | | | |