

Community Development Commission Minority & Woman Business Enterprise Abbreviated Application

INSTRUCTIONS:

If the Company is already certified through one of the following entities listed below,

- City of Chicago
- Cook County
- Illinois Department of Central Management
- Minority Supplier Development Council
- Women's Business Enterprise National Council
- Woman-Owned Small Business Certification thru SBA.GOV

fill out this two-page document, attach a copy of the entity's certification form and return this either by US Mail, Fax or Email to:

DuPage Community Development Commission
421 N. County Farm Road, 2-800
Wheaton, IL 60187
Fax: 630-407-6601
Communitydev@dupageco.org

ABBREVIATED FORM

I am applying for Recognition as (check either as applicable):

_____ Minority Business Enterprise
_____ Woman Business Enterprise

NOTE: Applicants Seeking Recognition Must Be U.S. Citizens or Permanent Resident

Company Name: _____
Address: _____
City, State, Zip: _____
Owner's Name: _____ Title: _____
Email Address: _____
Web Address: _____
*Parent Company: _____ Address _____
Business Phone #: _____ Fax # _____
*DUNs : _____
FEIN: _____
*If Applicable

Type of Business (check):

_____ Construction Contractor
_____ General Contractor
_____ Supplier of Construction Goods
_____ Specific Trade
_____ Other (related to construction)

Briefly describe products and /or services provided:

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AFFIDAVIT

The undersigned swears that the foregoing statements are made as part of this application are true and correct and includes all material information necessary to:

1. Identify and explain the services or products of the Company

2. Ownership – Please list the name of the owner/s and percentage of ownership

Name	_____	Percentage	_____
Name	_____	Percentage	_____
Name	_____	Percentage	_____

3. Establish the Eligibility for recognition as a (check)

Minority Business Enterprise
 Woman Business Enterprise

If, after filing this document there is any change (during the ensuing calendar year) in the information submitted, the undersigned will submit the changes to the DuPage County Community Development Commission.

Notarization

Owner Signature _____
Name (Print) _____
Title _____
Date _____

State of Illinois, County of _____ on this the _____ day of _____, 2021, before me appeared (owner) _____ that he or she was properly authorized by (company) _____ to execute the Affidavit and did so as his or her free act and deed.

Notary Public Signature _____

