

MINORITY-OWNED AND WOMEN-OWNED BUSINESS ENTERPRISE DIRECTORY APPLICATION

MBE/WBE Directory Overview

1. **Policy-** It is the policy of the Cuyahoga Metropolitan Housing Authority's (CMHA) to provide minority-owned business enterprises (MBEs) and women-owned business enterprises (WBEs) access to economic opportunities, particularly in the areas of construction, technical, and professional services, as well as CMHA's procurement of equipment, supplies, and other needed services.
2. **Participation Goals-** CMHA will use its best efforts to secure 20% participation by MBEs and 10% by WBEs in all of CMHA's contracting and procurement expenditures.
3. **MBE/WBE Directory-** To assist CMHA, contractors, and subcontractors in reaching the MBE/WBE participation goals, CMHA will maintain a directory of self-certified MBEs and WBEs.

Definitions

1. **African or Black** means a person having origin in any one of the Black racial groups of Sub-Saharan Africa or the Caribbean.
2. **Asian** means a person whose origin is from the Asian Pacific region, including: Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, Malaysia, Indonesia, the Philippines, Thailand, Tibet, Samoa, Guam, the U.S. Trust Territories of the Pacific, or the Northern Marianas, or a person whose origin is from the Indian subcontinent, including: India, Pakistan, Bangladesh, Nepal, and Sri Lanka.
3. **Covered Area** means the geographic area of Cuyahoga, Lake, Geauga, Summit, Medina, and Lorain counties.
4. **Hispanic** means a person of Spanish or Portuguese culture with origins in Mexico, Puerto Rico, Cuba, Caribbean, Central America, or South America, regardless of race.
5. **MBE** means a Minority-owned business enterprise that is at least 51% owned and controlled by one or more Minority persons. Those Minority owners must enjoy the customary incidents of ownership, share in the risks and profits commensurate with their ownership interest, and be able to exercise final authority over all aspects of daily operations.
6. **MBE/WBE Program Coordinator** means the Coordinator of CMHA's MBE/WBE Program.
7. **Minority** means a citizen or lawful, permanent resident of the United States who is a member of one or more of the following groups: African/Black, Hispanic, Native American, or Asian.
8. **Native American** means a person who is a member of the original peoples of North America, including American Indians, Eskimos, Aleuts, or Native Hawaiians and is regarded as such by the community of which the person claims to be a part. For non-native Hawaiians, the Native American must be a documented member of a North American Tribe, band, or otherwise organized group of native people who are indigenous to the continental United States and proof can be provided through a Certificate of Degree of Indian or Alaska Native Blood.
9. **Principal Place of Business** means the location from which the business's officers direct, control, and coordinate its activities.
10. **WBE** means a business that is at least 51% owned and controlled by one or more women who are all citizens or lawful, permanent residents of the United States. Those women owners must enjoy the customary incidents of ownership, share in the risks and profits commensurate with their ownership interest, and be able to exercise final authority over all aspects of daily operations.

Instructions

Application Process

To be included in CMHA's MBE/WBE Directory, a business must meet the definition of an MBE and/or WBE, complete this *MBE/WBE Self-Certification Form*, and submit it either by electronic mail or by sending via postal mail to an MBE/WBE Program Coordinator.

After CMHA receives your application, an MBE/WBE Program Coordinator will review the submitted materials to verify completion. Successful applicants will be listed on CMHA's MBE/WBE Directory. Successful applicants will also receive an e-mail notifying them that their business has been added to CMHA's MBE/WBE Directory. If your application is insufficient, an MBE/WBE Program Coordinator will contact you.

Completed Applications

Mail completed application and required documentation to:

Cuyahoga Metropolitan Housing Authority
Diversity, Equity & Inclusion Department
8120 Kinsman Road
Cleveland, OH 44104
Attn: MBE/WBE Program Coordinator

OR

E-mail completed application and required documentation to MBE/WBE@cmha.net.

Disclaimer, Verification, and Audits

Disclaimer - CMHA does not endorse the services provided by any businesses that self-certify as MBE or WBE. MBEs and WBEs are not entitled to the award of a contract simply by being listed on CMHA's MBE/WBE Directory. Businesses that self-certify their eligibility may receive preference as a MBE and or a WBE, subject to verification, on any contract(s) that may be awarded. Businesses that misrepresent their status as an MBE and or a WBE may face penalties.

Verification - CMHA may verify the ownership and control of any businesses included on its MBE/WBE Directory pursuant to the verification process outlined in Section 4 of the MBE/WBE Program.

Audits - CMHA may request any and all information and materials as may be required to substantiate the ownership and control of a business listed on CMHA's MBE/WBE Directory. This includes complete cooperation with CMHA allowing the examination of books, records, and files of the named company at the business location or at CMHA's Administrative office.

Part 1: Primary Point of Contact

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____

Cell Phone: _____ Email Address: _____

Part 2: Ownership Information

Identify and provide information for **each** owner of the Business, regardless of whether each owner is a Minority or Woman. If needed, attach an additional sheet of paper and provide the requested information for all owners.

1. Owner's Name: _____ Title: _____

Ownership Percentage:	%	Gender:	Female	Male
Owner's Minority Status (Select all that apply):	African/Black Hispanic	Native American Asian	Not applicable	

Describe this owner's duties and responsibilities to the Business:

2. Owner's Name: _____ Title: _____

Ownership Percentage:	%	Gender:	Female	Male
Owner's Minority Status (Select all that apply):	African/Black Hispanic	Native American Asian	Not applicable	

Describe this owner's duties and responsibilities to the Business:

3. Owner's Name: _____ Title: _____

Ownership Percentage:	%	Gender:	Female	Male
Owner's Minority Status (Select all that apply):	African/Black Hispanic	Native American Asian	Not applicable	

Describe this owner's duties and responsibilities to the Business:

Part 3: Business Information

Date Business Established: _____ (mm-dd-yyyy)

Federal Employer's Identification Number (FEIN): _____ (Ex. 34-1234567)

Services Provided (select all that apply):

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Computer (Repair/Sales) | <input type="checkbox"/> General Contractor |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Trucking | <input type="checkbox"/> Pest Control |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Heating (HVAC) | <input type="checkbox"/> Concrete/Asphalt |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Environmental Cleaning | <input type="checkbox"/> Asbestos |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Roofing | <input type="checkbox"/> Lead Abatement |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Window/Door Installation | <input type="checkbox"/> Carpet/Floor Installation |
| <input type="checkbox"/> Vinyl Siding | <input type="checkbox"/> Landscaping/Snow Plowing | <input type="checkbox"/> Other (specify): _____ |

Principal Place of Business: _____

Part 4: Certifications by Other Entities

If the Business holds a valid MBE/WBE certification from one of the entities listed below, CMHA will describe such additional certifications on its MBE/WBE Business Directory. To have those additional certifications listed on the MBE/WBE Directory, select all applicable certifying entities and **attach copies of those certifications to this form**. CMHA will not list additional certifications unless the Business provides CMHA copies of those certifications.

Acceptable Certifying Entities:

- State of Ohio
- Cuyahoga County
- Cities within Cuyahoga County (Identify the Cities: _____)
- Northeast Ohio Regional Sewer District
- State other than Ohio (Identify the States: _____)
- U.S. Small Business Administration
- U.S. Department of Transportation or other entity whose MBE, WBE, or disadvantaged business enterprise certification policies are governed by 49 C.F.R. Part 26 (e.g., Greater Cleveland Regional Transit Authority or Ohio Department of Transportation)
- National Minority Supplier Development Council
- Women's Business Enterprise National Council

Part 5: Self-Certification

This self-certification must be completed by each of the owners identified in Part 2 of this Self-Certification Form.

By signing below:

I certify that the Business is a (select all that apply):

Minority-Owned Business as defined by CMHA.

Women-Owned Business as defined by CMHA.

I certify that the statements and representations made in this Application are true and correct.

I agree to provide CMHA with any information and materials as CMHA may need to substantiate the Business's eligibility as an MBE/WBE. This may include complete cooperation with CMHA for the examination of books, records, and files of the business. I understand any material misrepresentation may be grounds for terminating any contract that might be awarded and for imposing sanctions under federal, state, or local laws concerning false statements. If CMHA includes my business in its MBE/WBE Business Directory and if any of the information provided in this Application changes during the ensuing year, I will timely inform CMHA of such changes.

I understand that by including the Business in its MBE/WBE Directory, CMHA does not endorse the Business or its services and that the Business is not entitled to the award of a contract with CMHA.

Owner's Name: _____ Title: _____

Owners Signature: _____ Date: _____