

SUPPLIER INCLUSION SELF-CERTIFICATION FORM

The following information is being requested on behalf of the Henry County Water Authority (HCWA). In support of our Supplier Inclusion Program, the HCWA is required to maintain certification of Business Size and Ownership from all suppliers. Your participation in reporting this information is important for ensuring successful relationships among all members of the business community. Our entire supplier base, regardless of size or ownership, is encouraged to actively support this Supplier Inclusion initiative. The HCWA will do this through programs designed to increase the inclusion of small businesses in the HCWA's sourcing process. To be considered in our Supplier Inclusion program, please complete, and return this form along with any diversity certificates by email or fax to the requestor.

Legal Company Name					NAICS Code/ SIC Code	
DBA/AKA Name					Online address for the NAICS Code Standards is: http://www.sba.gov/size/indextableofsize.html	
Current Address					Fed Tax ID or SSN (if Individual)	
City		State		Zip code		D&B Number
Remit To Address					Phone Number	
City		State		Zip code		Fax Number
Business Owner Name					Web Site	
Business Owner Email Address					Email Address	
# of Employees		Annual Sales		NIGP CODE:		

Business Classification		Ethnicity:	
Minority Business Enterprise (MBE)	_____	African American	_____
Women Business Enterprise (WBE)	_____	Asian American	_____
Veteran Owned Business	_____	Hispanic American	_____
Service-Disabled Veteran Owned Business	_____	Native American	_____
Historically Underutilized Business (HUB Zones)	_____	Asian Pacific American	_____
Small Disadvantaged Business (SDB)	_____		_____
8(a) Certified Business	_____		_____

Gender	Business Size Small _____ Large _____
Male _____ Female _____	Definition: <i>A small business is a business that is classified as "small" under the guidelines set forth by the Small Business Administration. Business size is dependent on the NAICS code, the number of employees, and the annual sales of a given company. Please refer to http://www.sba.gov/size for more details.</i>

Certification As a Small, Ethnic, Minority, or Woman Owned Enterprise

If applicable, indicate the agency from which your company has been certified as an ethnic or woman owned enterprise, or as a small business enterprise, and attach a copy of your certification. **COPY OF CERTIFICATION REQUIRED.**

	Certification Expiration Date	Certificate Number
Small Business Administration		
NMSDC Affiliated Council		
Women's Business Enterprise Nat'l Council		
Veteran Affairs Office		
Other: _____		
Other: _____		

The undersigned declares the foregoing statements are true and correct.

Prepared By:		
Signature:		
Title:		Date: _____

IMPORTANT NOTICE - Any person who misrepresents a firm's status as a small business in order to obtain a contract or subcontract, HCWA reserves the right to cancel your contract and debar your firm for a period of up to 3 years.