



Dear LGBT Business Enterprise:

Diverse Business Solutions LLC appreciates your interest in being certified as a LGBT Business Enterprise and looks forward to assisting you with this process. Once you become certified by Diverse Business Solutions, your business will be added to our comprehensive database of diverse suppliers.

Before you begin to complete the application, you must meet the following requirements:

- ✓ Citizen of the United States of America
- ✓ 51% Ownership by a LGBT qualifying individual of the business
- ✓ LGBT qualifying individual must control the operation

If you meet the above requirements, you are ready to complete the application. Please read the application fully before completing and ensure you complete all blank spaces. Please pay special attention to the format in which you must submit the application pages. In order to expedite the certification process and provide you with quality customer service, all applications for certification must be received in the order listed on page 9 of the application.

ALL application materials must be submitted in a 3-ring binder with each section tabbed and identified.

If you have any questions in regard to items that are not applicable to your business, please call us at (812) 471-2876 prior to the submission of your application and our certification department will be happy to assist you.

When you have completed the application and attached all requested information and documents please:

- Review your application and documents ***THOROUGHLY*** to ensure you have satisfied all requirements
- Please be advised that significant changes (changes in business ownership, status, etc.) will not be accepted after you have submitted your application to Diverse Business Solutions and the fee will be forfeited
- Enclose your non-refundable \$250.00 administrative and processing fee payment. **Payment must be submitted with your application.** The **review process will not begin** until the full processing fee is received. Please make checks payable to Diverse Business Solutions or complete credit card form on page 11 of the application
- Application must be signed and notarized
- Mail application and payment to:

Diverse Business Solutions LLC
Attention: LGBT Certification
2336 Thorium Drive, #17
Greenwood, IN 46143

If you have any questions, please do not hesitate contact our certification department at (812) 471-2876.

GENERAL INSTRUCTIONS TO COMPLETE LGBT CERTIFICATION APPLICATION

- Attach the non-refundable processing fee of \$250.00 – the application will not be processed without full payment; credit card payment can be made by completing page 11 of this application
- Application MUST be signed and notarized and include 3 personal, notarized references attesting to LGBT status
- Answer all questions – if a particular question does not apply to your type of business enter “N/A” in the appropriate space. If all questions are not correctly answered, this may delay your certification approval
- Please use space allotted to answer questions. However, if additional space is needed, please label each sheet with the correct corresponding number of the question and include with your application
- Please be advised that significant changes (i.e. changes in business ownership, status, etc...) will not be accepted after submission of the certification application to Diverse Business Solutions

Failure to complete all documents and submitting the required documentation will result in a delay of your application being processed. We strive to have all applications processed within 30 – 45 days from receiving the completed application including supporting documents such as tax information. The certification application must be received in a three-ring binder with documents in the order as outlined on page nine (9) of this application.

Mail application and payment to:

Diverse Business Solutions LLC
Attention: LGBT Certification
2336 Thorium Drive, #17
Greenwood, IN 46143

If you have any questions, please do not hesitate to contact our certification department at (812) 471-2876.

Diverse Business Solutions LLC LGBT Application for Certification

Please answer all questions as completely as possible. When answers require more space, use additional paper, properly identifying the item referred by the appropriate number. If a particular question does not apply to your business operation, write not applicable (N/A) in the space provided. Company submitting application must be at least fifty-one percent (51%) LGBT owned by one or more individuals with U.S. citizenship. Please be sure to read carefully the list of required documentation on page 7 and include with your completed application the non-refundable processing fee of \$250.00.

Date of application: _____/_____/_____ (Month/Day/Year)

1. Company Name _____

2. Parent Company: _____

3. Street Address: _____ Check if home-based office

4. Mailing Address [if different]: _____

5. City: _____ 6. State: _____ 7. Zip: _____

8. Telephone: _____ 9. Fax Number: _____

10. Website Address: _____ 11. E-mail Address: _____
(This is a required field)

12a. Employer's ID Number/Federal ID Number: _____ and/or

Social Security Number: _____

12b. In the space below, please give a concise description of company's product(s), service(s), or type of construction. If your company offers more than one product/service, list primary product or service first. Use additional paper, if necessary, and attach to this form. The description below will be placed in our database and online directory.

12c. List owner, members, corporate shareholders and Limited Liability Corporation members and title:

Owner's Name(s)	Owner's Title	LGBT (yes/no)

13. Primary Contact (s) Name (preferably owner/principal): _____

14. Primary Contact's Title: _____ Email Address: _____

Telephone: _____

15. NAICS Codes (s): _____

If you don't know your NAICS Code, go to: <http://www.naics.com/search.htm>. (This is a required field; limit 5 codes)

*DBS's definition of Sole Proprietorship is a company owned/operated 100% by one (1) individual. Split ownership does not constitute Sole Proprietorship.

26a. Are business premises: (check one)

- Owned
- Leased
- Home based

List or attach location of all additional facilities: _____

26b. Geographic market

- Local
- Regional
- National
- International

27. List of contributions of each of the owners.

Name	Actual Money	Equipment	Real Estate	Expertise
	\$			years
	\$			years
	\$			years
	\$			years

28. If license or permit is required to provide product or service, give information as follows:*

Name of License Holder	Type of License/Permit	License Number

* This will determine what licenses or permits are owned by the LGBT applicant.

29. Does your company share any resources with any other LGBT firm or individual? Yes No
 (office facilities, storage space, equipment, personnel, inventory, financing, etc.) If yes, please identify and explain fully.

30. Identify any owner, management official or employee of your company who is associated with any other business.
 Yes No If yes, explain fully and identify the business or person with whom you have an agreement and attach any written agreement and/or explain any oral or intended agreement.

31. Identify those individuals (owners, non-owners and key employees) who are responsible for the day-to-day operations and policy decision-making, including those with prime responsibilities for:

Operation	Name	Title	LGBT (Yes or No)
Financial decisions			
Signatory on major documents			
Personnel management			
Marketing/sales			
Payroll			
Estimating			
Purchasing of major items			
Supervision of Field Operations			
What jobs firm will undertake			

32. Is the company bonded?

- Yes, Amount _____
- No

Bonding / Security Company _____

33. Provide three current customer or client references.

*A. COMPANY _____

Address _____

City/State/ZIP _____

Buyer _____ Phone: _____

Product/Service _____ Dollar Volume: _____

*B. COMPANY _____

Address _____

City/State/ZIP _____

Buyer _____ Phone: _____

Product/Service _____ Dollar Volume: _____

*C. COMPANY _____

Address _____

City/State/ZIP _____

Buyer _____ Phone: _____

Product/Service _____ Dollar Volume: _____

34. Provide two current bank references

*A. Name of Bank Officer _____ Title: _____

Name of Institution _____

Address _____

City/State/ZIP _____

Type of Account _____ Credit Line: \$ _____

*B. Name of Bank Officer _____ Title: _____

Name of Institution _____

Address _____

City/State/ZIP _____

Type of Account _____ Credit Line: \$ _____

Name of Bank Officer _____ Title: _____

35. If company is a Distributor, please complete: Average Dollar Value of Inventory: (Required Field)

36. If company is a Manufacturer, list basic equipment and indicate whether equipment is leased or owned. (Required Field)

Basic Equipment	Leased/Owned
_____	_____
_____	_____
_____	_____

37. If company is a Contractor, please complete the following section: (Required Field)

License # _____ License Certification _____

Trade Specialty _____

Union Name/Local _____ Union Affiliation _____

Most Recent Project:

Project Name _____ Start Date _____ Finish Date _____

Geographical Area _____ Dollar Value _____

NOTE: PLEASE SEND COPY OF BONDING CERTIFICATE

Please name your responsible Managing Officer or responsible Managing Employee:

38. Transportation Information:

- Operating Status:
- Independent Carrier
- Insurance Carrier

- Common Carrier Operating Authorities:
- Interstate
 - Intrastate

List the Commodities you normally transport:

Vehicles/Equipment	Owned/Leased & Quantity	Registration No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTE: Please forward copies of all applicable vehicle title and/or lease agreements with this application

39. Does the applicant business have any subsidiaries or affiliates or is it a subsidiary of another concern? Check one:

- Yes
- No

If yes, provide the name, address, and telephone number of the subsidiary, affiliate or parent company. Also describe the relationship of the applicant company to the subsidiary, affiliate or parent.

40. Does applicant business concern or any person listed in 12c above have or intend to enter into any type of agreement with any other concern or person which relates to or affects the on-going administration, management or operations of the applicant concern? Such agreements include but are not limited to: management and joint venture agreements and any arrangement or contract involving the provision of such compensated services such as administrative service, marketing, production and other type of compensated services. If yes, attach a copy of any written agreement or an explanation of any oral or intended agreement.

- Yes
- No

41. Is the applicant business and/or owner concern involved in any present or pending lawsuit?

Check one:

- Yes If yes, provide details on a separate sheet.
- No

42. Supply a copy of the applicant's financial statement for one year preceding the year of application or for the time that the applicant has been in business if less than one year, plus financial statement of any subsidiaries of affiliates of the applicant for the same period of time. If the applicant is a new business concern, enclose a copy of an opening balance sheet and projection of income for next three years, or a statement by a certified public accountant, which states that the applicant is a viable business concern. All financial statements submitted to Diverse Business Solutions must show applicable date of the information given and must be signed and dated by the proprietor, partner or authorized officer unless prepared by an independent certified public accountant. All materials will be kept confidential.

In order to complete the processing of your application in a timely fashion, all applications for certification must be received in the following manner to ensure a timely review. Please include appropriate documentation with the application and indicate which documents are attached. The documentation required for certification is listed below, but is not limited to:

ALL BUSINESSES ARE REQUIRED TO SUBMIT in a 3-ring binder with each section tabbed and labeled in the order listed below:

- \$250.00 non-refundable processing fee
- Complete, signed, dated and notarized application
- A brief history of the business
- Fictitious Business Statement (If doing business in a name other than the company legal name)
- Proof of U.S. Citizenship (passport, birth certificate)
- Proof of Identity for Owner(s), Partners, Shareholders (driver's license, birth certificate)
- Resume(s) of all owner(s), partners or shareholders
- Two Years of Federal Tax Returns (Business)* (Personal taxes if in business less than 1 year)
- Financial Statements (P &L statement of cash flows, balance sheet)** (Projected P&L if in business less than 1 year)
- Notes Payable (if any)
- Applicable Operating Business License and/or permits
- Third-party agreements: management service agreements
- Copy of Bank Account Signature Card or letter from Bank identifying signers
- Lease Agreements
- Equipment Rental and Purchase Agreements (if applicable)
- Contract or work history for the past three years (if applicable) (name/contact type of work performed or type of contract received)
- Equipment owned or available (include description of equipment, year acquired, and current value)
- Proof of Bonding Capacity (if applicable)
- Three notarized references attesting LGBT ownership status

SUBMIT THE FOLLOWING DOCUMENTS FOR YOUR COMPANY'S BUSINESS STRUCTURE:

LLCs SUBMIT: Required documents for all single or multi member LLCs

- Operating License (if applicable)
- Certificate of Organization (From Secretary of State)
- Operating Agreement
- Articles of Organization
- Proof of Capital Investment (where monies originated)

PARTNERSHIPS SUBMIT: Required documents

- Partnership Agreements
- Buy Out Rights
- Profit Sharing
- Current Partnership
- Financial Statement
- Proof of Capital Investment (where monies originated)

CORPORATIONS SUBMIT: Required documents for all sole or multi member Corporations

- Article of Incorporation
- Certificate of Corporation
- Minutes of 1st Board Meeting
- Copies of Stock Certificates
- Current Stock Ledger
- Corporate Bylaws
- Proof of Stock Purchase (where monies originated)

SOLE PROPRIETORSHIPS SUBMIT: Required documents

- Proof of Capital Investment (where monies originated)

IMPORTANT NOTE:

Please submit only required documents in chronological order. The submission of a neatly organized application accompanied with the required documents will expedite the processing of your application. Please provide an explanation for any documentation you cannot provide. **Incomplete applications will not be considered for certification.**

I (We) have completed and submitted the Diverse Business Solutions application for LGBT Certification as requested by DIVERSE BUSINESS SOLUTIONS LLC and hereby certify that the information contained herein and all attachments submitted are true and correct and accurate to the best of my (our) knowledge and belief. The certification, when granted, will be for a one (1) year period. I (We) further understand that completion and submission of this form, together with all attachments hereto, is not necessarily the sole criteria for determining certification of LGBT status by the DIVERSE BUSINESS SOLUTIONS LLC.

I (We) acknowledge that if Diverse Business Solutions discovers that a statement has been made herein which the applicant knows to be false, the certification process will be terminated immediately. I (We) agree that all materials submitted with this package shall become the property of Diverse Business Solutions.

I (We) further agree that once certified, the continued certification and registration by DIVERSE BUSINESS SOLUTIONS LLC will be according to the guidelines, rules and regulations set by DIVERSE BUSINESS SOLUTIONS LLC. Termination of my (our) status may be based upon, but not necessarily limited to, any one of the following:

1. Cessation of business operation by the LGBT business concern.
2. Discovery that any false information was knowingly supplied to DIVERSE BUSINESS SOLUTIONS LLC in the completion of this form or as contained in any attachments submitted.
3. Failure to provide timely notice or withholding of any notice to DIVERSE BUSINESS SOLUTIONS LLC of the transfer or loss of ownership and/or management and control of the business concern by its LGBT group members.
4. Failure or refusal to allow DIVERSE BUSINESS SOLUTIONS LLC and/or its representative access to the company's place of business upon reasonable notice and demand for the purpose of a site visit.
5. Sale, exchange, or transfer of ownership of the LGBT business concern, if such transfer results in the loss of control and ownership of the business concern by the LGBT group members.

I (We) understand and agree that DIVERSE BUSINESS SOLUTIONS LLC reserves the right to request any further and additional information that it may deem necessary to substantiate the information and representations made by the applicant (applicants) for certification. I (We) declare that the company in whose name this application is being submitted is at least fifty-one percent (51%) owned by one or more LGBT individuals (as defined herein) and such individuals control, operate and manage the company.

The undersigned hereby agrees (agree) to hold DIVERSE BUSINESS SOLUTIONS LLC free and harmless from any and all claims, demands, and damages whatsoever arising out of the presentation of this application and agrees to indemnify and hold DIVERSE BUSINESS SOLUTIONS LLC harmless for any and all liability in connection with the certification of the information contained in this application.

The undersigned hereby declares (declare) under penalty of perjury that all statements made in this application and any attachments hereto are true and correct. I understand that the \$250.00 Certification Fee is included and non-refundable (Sign On Next Page)

Business Name _____

Signature of all Proprietors, Partners and President of the Corporation

_____ Date _____

_____ Date _____

_____ Date _____

_____ Date _____

Please have this form NOTARIZED, retain a copy of this form for your files and return the original and the attachments to:

Certification Department
 Diverse Business Solutions LLC
 2336 Thorium Drive, #17
 Greenwood, IN 46143

State of _____

County of _____

On _____ 20____, before me, (name) _____ the undersigned

Notary Public, personally appeared (name) _____, personally known to me, or proved to me on the basis of satisfactory evidence, to be the person(s) whose name (s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed in the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s) of the entity upon which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public _____ (Seal)

Commission Expires _____

Credit Card Information (Only complete this section if you are using your credit card to pay the \$250.00 processing fee.)

Visa _____ MasterCard _____ American Express _____

Cardholder Name: _____

Cardholder Address: _____

City: _____ State: _____ Zip: _____

Card Number: _____ Expiration Date: _____ CVV: _____

Signature: _____