



***Macon-Bibb County***  
***Office of Small Business Affairs***

**Small Local Business Enterprise**  
**Certification Application**

**LONG FORM**

## Macon-Bibb County SLBE Certification Application

### Roadmap for Applicants

#### **Purpose**

The Small Local Business Enterprise Program (hereinafter referred to as "SLBE") is a race and gender-neutral procurement tool for Macon-Bibb County's use in its efforts to ensure that all segments of its local business community have a reasonable and significant opportunity to participate in County contracts for construction, architectural and engineering services, professional services, non-professional services, and commodities. The Small Local Business Enterprise Program also furthers the County's public interest to foster effective broad-based competition from all segments of the vendor community, including but not limited to, minority business enterprises, small business enterprises and local business enterprises.

The information supplied herein by an authorized individual shall clearly identify and evidence the extent of small local business ownership control of this business enterprise. Definitions: Macon-Bibb County Section 19-56 - 19-65 Small Local Business Enterprise (SLBE).

- **"Small Local Business Enterprise (SLBE)":** an independently owned firm that is not dominant in its industry and that satisfies all requirements of being both a "Small Business Enterprise" and a "Local Business Enterprise"
- **"Independently Owned, Managed, and Operated":** ownership of a SLBE firm must be direct, independent, and by individuals only. Business firms that are owned by other businesses or by the principals or owners of other businesses that cannot themselves qualify under the SLBE eligibility requirements shall not be direct and independent of the influence of any other businesses that cannot themselves qualify under the SLBE eligibility requirements.
- **"Local Business Enterprise":** a firm having a Principal Place of Business and a Significant Employment Presence in Macon-Bibb County, Georgia. This definition is subsumed within the definition of Small Local Business Enterprise.

#### **SIZE STANDARD ELIGIBILITY REQUIREMENTS:**

##### 1. Small Local Business Enterprise ("SLBE")

A Small Local Business Enterprise, as defined by Section 19-56 of the Macon-Bibb County Code of Ordinances, shall have the following size limitations:

- a. The SLBE must not have employed more than fifty (50) full-time employees at any one time during the last three years; and
- b. The SLBE must have annual gross revenues within its largest primary NAICS commodity code as averaged over its most recent past three fiscal years of not more than \$13.5 million for construction firms, specialty trade contractors, and manufacturing firms; not more than 1.2 million for architectural firms; not more than \$1.2 million for professional services firms (e.g., scientific, real estate, insurance, accounting, legal, etc.); not more than \$1.2 million for engineering firms; and not more than \$1.2 million for wholesale operations, retail firms, and all other services firms (e.g., truck transportation, administrative support services, repair and maintenance services).
- c. If a business has not existed for 3 years, the employment and gross sales limits described above shall be applied based upon the annual averages over the course of the existence of the business not to exceed the three years. Once the gross annual receipts of a business exceed the gross sales average limits, it should no longer be eligible to benefit as an SLBE firm and should be graduated from the program.

##### 2. Eligibility for the SLBE Program

To meet the size standard requirements for the SLBE Program, per Sections 19-56 and 19-58 of the Macon-Bibb County Code of Ordinances, a firm must comply with the size standards outlined in section 1 above.

*There is no application fee for SLBE certification. All applications for certification must be accompanied by a sworn affidavit attesting to the accuracy and truthfulness of the information provided.*

*Macon-Bibb County shall provide eligibility determinations for new candidates within 90 days of receipt of a complete application.*

**Dear Applicant:**

Thank you for your interest in becoming a certified SLBE with Macon-Bibb County. Please review the checklist below and compare it with your application and submission documents. Please make sure to include all supplemental documentation (as applicable) with your application. Failure to submit a complete and accurate application could result in a delay of your certification review. Again, thank you for your interest in the Macon-Bibb County SLBE Program. Please return your complete application to:

**Macon-Bibb County  
Attn: SLBE Certification Program  
Office of Small Business Affairs  
700 Poplar Street  
Macon, Georgia 31201**

**ALL APPLICANTS:**

- Work experience resume(s) that include places of ownership/employment and corresponding dates. (All Owners)
- A valid business license from a municipality within the Macon-Bibb County area.
- Entire copy of personal tax returns for the last 3 years, if applicable.
- Entire copy of corporate, partnership, or joint venture tax returns for the last 3 years.
- Documented proof of contributions used to acquire ownership for each owner (e.g. both sides of cancelled checks).
- Signed loan agreement and security agreements.
- Description of real estate and proof of ownership listed.
- List of equipment leased along with signed lease agreements.
- List of construction equipment and vehicles owned and titles/proof of ownership.
- Signed leases for office/storage space.
- End of Year Balance Sheets and Income Statements for the past 3 years (or life of firm if less than 3 years old). A new business must provide a current Balance Sheet.
- Copies of relevant professional licenses
- Other DBE/ACDBE, SBA 8(a) or GMSDC certifications or denials and decertifications.
- Bank Authorization and Signatory cards.
- Schedule of salaries paid to all officers, managers, owners, or directors of the firm (W-2's).
- Proof of Identity (a. Birth Certificate or b. Valid Government Issued Photo ID or Passport)

**PARTNERSHIP OR JOINT VENTURE:**

- Original and any amended Partnership Agreements.
- Assumed name, fictitious name, or other registration certificate from appropriate governmental agency, if applicable.

**CORPORATION OR LLC:**

- Official Articles of Incorporation (signed by state official).
- Both sides of all Corporate Stock Certificates and Stock.
- Transfer Ledger.
- Shareholders Agreement.
- Minutes of all stockholder and Board of Directors meetings.
- Corporate by-laws and any amendments.

**Section 1. CERTIFICATION INFORMATION**

**1. Prior/ Other Certifications.**

(a) Is your firm currently certified for any of the following programs? <i>(If yes, attach a copy of your certification(s)).</i> <input type="checkbox"/> USDOT-DBE <input type="checkbox"/> SBA 8(a) <input type="checkbox"/> NMSDC/GMSDC		Name of the certifying agency:	
Has this firm home had an on-site visit conducted? <input type="checkbox"/> Yes, on ___/___/___ <input type="checkbox"/> No			
(b) Has your firm applied for certification for any program listed in 1(a) in the past? <i>If Yes, identify: Other names your company has used:</i>		<input type="checkbox"/> Yes, on ____/____/____	<input type="checkbox"/> No
(c) Has this firm or any of its owners, Board of Directors, officers or management personnel been denied certification before by any agency in any state, local, or Federal entity? <i>If Yes, identify State and name of agency:</i>		<input type="checkbox"/> Yes, on ____/____/____	<input type="checkbox"/> No

**Section 2: GENERAL INFORMATION**

**2. Contact Information.**

Contact person:		Legal name of firm:		
Phone #:	Cell#:	Fax#:		
E-mail Address:		Website (if firm has one):		
Street Address of firm: (No P.O. Box #)				
Mailing address of firm:	City:	County:	State:	Zip:

**3. Business Profile.**

Primary nature of business:		Federal tax ID:		
Federal identification number or Applicant's Social Security number:				
This firm was established on ___/___/___		I (we) have owned this firm since: ___/___/___		
Did the business exist under a different type of ownership prior to the date indicated above? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, Explain.</i>				
Method of acquisition (check all that apply): <input type="checkbox"/> Started new business <input type="checkbox"/> Bought existing business <input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other (explain)				
Has this firm operated under a different name during the past five years? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, explain.</i>				
Has this firm applied for reorganization under Chapter 11 and/or liquidation under Chapter 7, within the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, provide court papers)				
Type of firm (check all applicable): <input type="checkbox"/> Sole proprietorship (provide a copy of the assumed name certificate) <input type="checkbox"/> Partnership (provide copies of all partnership agreements and the assumed name certificate) <input type="checkbox"/> Limited Liability Company		<input type="checkbox"/> Corporation (provide Articles of Incorporation, copies of the stock certificates (both sides), Stock Transfer Ledger, Shareholders' Agreement, all minutes of the shareholders' meeting and Board of Directors' meetings, the Corporate Bylaws and Bylaws Amendments (if applicable), the Corporate Bank Resolution and Bank Signature Cards) <input type="checkbox"/> Other		
Number of employees: Permanent Full-time _____		Temporary Full-time _____		Seasonal Full-time _____
Where do you obtain seasonal employees?				

Does your firm directly pay, in its own name, all its employees? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, explain)		
Specify the gross receipts of the firm for the last 3 years: (NOTE: Attach copies of full tax returns or balance sheets for each year to support the entered receipts total.)	Year ending _____	Total receipts \$ _____
	Year ending _____	Total receipts \$ _____
	Year ending _____	Total receipts \$ _____

**Section 3. OWNERSHIP**

**4. Identify all individuals or holding companies with any ownership interest. List their cash, equipment and/or real estate and/or other investment in the firm; and attach the documentation of the source of these investments.** (Attach work experience resumes of each person; If more than two owners, attach a separate sheet).

**First Person**

Name:		Title:		Home Phone#:	
Home Address (street and number)			City:	State:	Zip:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Ethnic Group (Attach copy as proof i.e. driver's license, birth certificate or passport):			
U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Native American	
Legal permanent resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Caucasian	<input type="checkbox"/> Asian Pacific	<input type="checkbox"/> Asian Indian	
Number of years owned:		Initial investment of acquire ownership interest in firm:			
Percentage owned:		<b>Type</b>		<b>Dollar Value</b>	
Relation to other owners:		Cash		\$	
		Real Estate		\$	
		Equipment		\$	
		Other		\$	
Shares of Stock:	<u>Number</u>	<u>Percentage</u>	<u>Class</u>	<u>Date Acquired</u>	<u>Method Acquired</u>
Additional contributions made by anyone since the business was started/acquired:					

**Second Person**

Name:		Title:		Home Phone#:	
Home Address (street and number)			City:	State:	Zip:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Ethnic Group (Attach copy as proof i.e. driver's license, birth certificate or passport):			
U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Native American	
Legal permanent resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Caucasian	<input type="checkbox"/> Asian Pacific	<input type="checkbox"/> Asian Indian	
Number of years owned:		Initial investment of acquire ownership interest in firm:			
Percentage owned:		<b>Type</b>		<b>Dollar Value</b>	
Relation to other owners:		Cash		\$	
		Real Estate		\$	
		Equipment		\$	
		Other		\$	
Shares of Stock:	<u>Number</u>	<u>Percentage</u>	<u>Class</u>	<u>Date Acquired</u>	<u>Method Acquired</u>
Additional contributions made by anyone since the business was started/acquired:					

**Section 4: CONTROL**

**5. Identify officers and Board of Directors.** (Note: Attach work experience resumes of each person; If additional space is required, attach a separate sheet)

	<b>Name</b>	<b>Title/Date Appointed</b>	<b>Ethnicity</b>	<b>Gender</b>
Company Officers	1.			
	2.			
	3.			
Board of Directors	1.			
	2.			
	3.			

**6. Identify management personnel who control the firm in the following areas.** (Attach work experience resumes, including dates of employment at each company, for each person; If more than two persons, attach a separate sheet)

	<b>Name</b>	<b>Title</b>	<b>Ethnicity</b>	<b>Gender</b>
<b>Financial Decisions</b> (responsibility for check signing, acquisitions of lines of credit, surety bonding, supplies, etc.)				
	1.			
	2.			
<b>Estimating, bidding, and negotiating</b> (cost estimates, bid preparation and submission, negotiations or contract execution)				
	1.			
	2.			
<b>Hiring /firing of management personnel</b>				
	1.			
	2.			
<b>Field / Production Operations Supervisor</b> (site supervision / scheduling, project management services)				
	1.			
	2.			
<b>List all field supervisors</b>				
	1.			
	2.			
<b>Office Management</b>				
	1.			
	2.			
<b>Marketing/Sales</b>				
	1.			
	2.			
<b>Purchasing of major equipment</b>				
	1.			
	2.			

**7. Identify persons or firms who provide the following services:**

	Name of Firm	Name of Contact Person	Address	Phone No.
External management or technical / computer service				
	1.			
Accountant	1.			
Attorney	1.			
Principal suppliers	1.			
	Materials or equipment supplied List:			
	2.			
	Materials or equipment supplied List:			

**8. Identify those union(s), business(es), or professional association (s) in which the owner (s) or management personnel have membership.**

Name of union, business or professional association	Address	Phone No.
1.		
2.		

**9. Attach a list of equipment and/or vehicles within your firm's possession or under your control (indicate separately), office space (owned or leased) and storage space (owned or leased), including signed leasing agreements.**

**10. Financial Information.**

(a) Banking Information

**Name of Bank:** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

Name of Officer: \_\_\_\_\_

Address of bank: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(b) Bonding Information: If you have bonding capacity, identify:

**Name of agent or broker:** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

Address of Agent /Broker: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bonding limit: Aggregate limit \$ \_\_\_\_\_ Project limit \$ \_\_\_\_\_

(c) Attach copies of year end balance sheet and profit and loss (income) statements for the last three years, or if business has been in operation for less than one year, provide a current balance sheet, a projected profit and loss statement for the next 12 month period and a projected balance sheet for the end of that period.

**11. Identify all sources, amount and purposes of money loaned to the firm, including name of person or firm securing the loan, if other than owner. (Attach copies of all loan agreements.)**

Name of Source	Address of Source	Amount
1.		
2.		
3.		

**12. List current licenses (e.g. contractor, engineer, architect, ICC, etc). (Attach copies of licenses.)**

Name of Individual or Firm	Name of License	Exp. Date	License Number
1.			
2.			
3.			

**13. Does your firm have key personnel insurance?**  YES  NO (If "Yes", attach a list of the persons named and the value)

**14. List the largest contracts completed by this firm in the past 3 years.**

Name of Owner / Contractor	Name / location of project	Type of work performed
1.		
2.		
3.		

**15. List all active jobs this firm is currently working on.** (If additional space is required, attach a separate sheet.)

Prime Contractor/ Proj. #	Location of project	Type of work	Start Date	Completion date
1.				
2.				
3.				

### Section 5. AFFILIATION

**16. Affiliation with other businesses.**

(a) Affiliate companies:	
(b) Do any of the people listed in questions 4, 5, or 6 perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Person: _____ Title: _____ Business: _____ Function: _____	
(c) Do any of the people listed in questions 4, 5, or 6 own or work for other firms that have a business relationship with yours? (E.G. ownership interest, shared office space, financial investments, equipment leases or personal sharing) <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Firm: _____ Person: _____ Business Relationship: _____	
(d) Whether affiliated or not, is the applicant firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business organization, or entity? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Firm's name: _____ Tax ID number: _____	
At present or in the past 5 years: If you answered Yes to any of these questions, identify on a separate piece of paper any relevant names, addresses, dates, and explanations.	Has this firm been a subsidiary of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has this firm consisted of a partnership in which one or more of the partners are other firms? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has any other firm owned 5% or more of this firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has this firm had any subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has this firm owned 5% or more of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Section 6. OTHER

**17. Are you a trucking firm?**  YES  NO

(If Yes, attach proof of ownership of a fully operational truck and trailer. Documentation should include insurance and titles.)

**18. Are you a regular dealer?**  YES  NO

(If Yes, attach proof of warehouse, product lines carried, and distribution equipment.)



**AFFIDAVIT OF CERTIFICATION**

A material or false statement or omission made in connection with this application is sufficient cause for denial of certification, revocation of a prior approval, initiation of suspension or debarment proceedings, and may subject the person and/or entity making the false statement to any and all civil and criminal penalties available pursuant to applicable federal and state law.

I \_\_\_\_\_(full name), swear or affirm under penalty of law that I am \_\_\_\_\_(title) of applicant firm \_\_\_\_\_(firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions in are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities, and pertinent history of the named firm as well as the ownership, control, affiliations thereof.

I recognize that the information submitted in the application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by mean it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books records, documents and files, in whatever form they exist, of the names firm and is affiliates, inspection of its place(s) of business and equipment, and to permit interviews of principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor and Macon-Bibb County on an ongoing basis, current, complete, and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to Macon-Bibb County of any material change in the information contained in the original application within 30 days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

**I declare under penalty of perjury that the foregoing is true and correct.**

Signature of owner, officer, or partner \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

I declare under penalty of perjury that the information provided in this application and supporting documents relating to my disadvantaged status and me is true and correct.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: (mm/dd/yy) \_\_\_\_\_  
Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: (mm/dd/yy) \_\_\_\_\_  
Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: (mm/dd/yy) \_\_\_\_\_

NOTARY CERTIFICATE	
STATE OF _____	
COUNTY OF _____	
Subscribed and sworn to before me this _____ day of _____, 20 _____	
Signature of Notary Public _____	Printer/typed name of Notary Public _____
County of residence _____	Date commission expires _____

PLEASE CHECK THE APPROPRIATE BOX FOR ITEMS OR SERVICES YOU CAN PROVIDE.

CODE DESCRIPTION

- 005 ABRASIVES
- 010 ACOUSTICAL TILE, INSULATING MATERIALS
- 015 ADDRESSING, COPYING, MIMEOGRAPH MACHINES SUPPLIES
- 019 AGRICULTURAL CROPS AND GRAINS
- 020 AGRICULTURAL EQUIPMENT, IMPLEMENTS
- 022 AGRICULTURAL IMPLEMENT AND ACCESSORY PARTS
- 025 AIR COMPRESSORS AND ACCESSORIES
- 031 AIR CONDITIONING, HEATING, VENTILATING EQUIPMENT
- 035 AIRCRAFT AND AIRPORT, EQUIPMENT, PARTS
- 037 AMUSEMENT, DECORATIONS, ENTERTAINMENT, TOYS, ETC.
- 040 ANIMALS, BIRDS, MARINE LIFE, & POULTRY
- 045 APPLIANCES AND EQUIPMENT, HOUSEHOLD TYPE
- 050 ART EQUIPMENT AND SUPPLIES
- 052 ART OBJECTS
- 055 AUTOMOTIVE ACCESSORIES FOR CARS, BUSES, TRUCKS
- 060 AUTOMOTIVE MAINTENANCE/REPAIR ITEMS AND PARTS
- 065 AUTOMOTIVE BODIES, ACCESSORIES, AND PARTS
- 070 AUTOMOTIVE VEHICLES AND RELATED EQUIPMENT
- 075 AUTOMOTIVE SHOP EQUIPMENT AND SUPPLIES
- 080 BADGES, EMBLEMS, NAME TAGS AND PLATES, JEWELRY
- 085 BAGS, BAGGING, TIES, AND EROSION CONTROL QUIPMENT
- 090 BAKERY EQUIPMENT, COMMERCIAL
- 095 BARBER AND BEAUTY SHOP EQUIPMENT AND SUPPLIES
- 100 BARRELS, DRUMS, KEGS, AND CONTAINERS
- 105 BEARINGS (EXCEPT WHEEL BEARINGS AND SEALS)
- 110 BELTS & BELTING: CONVEYOR, ELEVATOR, ETC
- 115 BIOCHEMICALS, RESEARCH
- 120 BOATS, MOTORS, AND MARINE AND WILDLIFE SUPPLIES
- 125 BOOKBINDING SUPPLIES
- 135 BRICKS, STONE & OTHER CLAY PRODUCTS
- 140 BROOM, BRUSH, AND MOP MANUFACTURING MACHINERY
- 145 BRUSHES (NOT OTHERWISE CLASSIFIED)
- 150 BUILDER'S SUPPLIES
- 155 BUILDINGS AND STRUCTURES: FABRICATED AND PREFAB
- 160 BUTCHER SHOP AND MEAT PROCESSING EQUIPMENT
- 165 CAFETERIA AND KITCHEN EQUIPMENT, COMMERCIAL
- 175 CHEMICAL LABORATORY EQUIPMENT AND SUPPLIES
- 180 CHEMICAL RAW MATERIALS (LARGE QTY FOR MFG)
- 190 CHEMICALS AND SOLVENTS, COMMERCIAL (IN BULK)
- 192 CLEANING DETERGENTS, SOLVENTS, AND STRIPPERS
- 193 CLINICAL LAB REAGENTS & TESTS
- 195 CLOCKS, TIMERS, WATCHES, & JEWELERS' TOOLS
- 200 CLOTHING, ATHLETIC, CASUAL, DRESS, UNIFORMS
- 201 CLOTHING ACCESSORIES (SEE CLASS 800 FOR SHOES)
- 204 COMPUTER HARDWARE/PERIPHERALS: MICROCOMPUTERS
- 206 COMPUTER HARDWARE/PERIPHERALS: MINI & MAIN FRAME
- 207 COMPUTER ACCESSORIES AND SUPPLIES
- 208 COMPUTER SOFTWARE: MICROCOMPUTERS (PREPROGRAMMED)
- 209 COMPUTER SOFTWARE: MINI/MAINFRAME (PREPROGRAMMED)
- 210 CONCRETE & METAL CULVERTS, PILINGS, SEPTIC TANKS
- 220 CONTROLLING, INDICATING, MEASURING INSTRUMENTS
- 225 COOLERS, DRINKING WATER (WATER FOUNTAINS)
- 232 CRAFTS, GENERAL
- 233 CRAFTS, SPECIALIZED
- 240 CUTLERY, DISHES, FLATWARE, GLASSWARE, UTENSILS
- 245 DAIRY EQUIPMENT AND SUPPLIES
- 250 DATA PROCESSING CARDS AND PAPER
- 255 DECALS AND STAMPS
- 260 DENTAL EQUIPMENT AND SUPPLIES
- 265 DRAPERIES, CURTAINS, & UPHOLSTERY MATERIAL
- 269 DRUGS AND PHARMACEUTICALS
- 271 DRUGS, PHARMACEUTICALS, & SETS
- 280 ELECTRICAL CABLES AND WIRES (NOT ELECTRONIC)
- 285 ELECTRICAL EQUIPMENT AND SUPPLIES
- 287 ELECTRONIC COMPONENTS, REPLACEMENT PARTS
- 290 ENERGY COLLECTING EQUIPMENT: SOLAR AND WIND
- 295 ELEVATORS AND ESCALATORS, BUILDING TYPE
- 305 ENGINEERING, SURVEYING & DRAWING EQUIPMENT
- 310 ENVELOPES, PLAIN OR PRINTED
- 315 EPOXY BASED FORMULATIONS: ADHESIVES AND COATINGS
- 318 FARE COLLECTION EQUIPMENT AND SUPPLIES
- 320 FASTENING, PACKAGING, STRAPPING, TYING EQUIPMENT
- 325 FEED, BEDDING, VITAMINS & SUPPLEMENTS FOR ANIMALS
- 330 FENCING
- 335 FERTILIZERS AND SOIL CONDITIONERS
- 340 FIRE PROTECTION EQUIPMENT AND SUPPLIES
- 345 FIRST AID & SAFETY EQUIPMENT & SUPPLIES

CODE DESCRIPTION

- 350 FLAGS, FLAG POLES, BANNERS, AND ACCESSORIES
- 360 FLOOR COVERING, INSTALLATION/REMOVAL EQUIPMENT
- 365 FLOOR MAINTENANCE MACHINES, PARTS & ACCESSORIES
- 370 FOOD PROCESSING AND CANNING EQUIPMENT & SUPPLIES
- 375 FOODS: BAKERY PRODUCTS (FRESH)
- 380 FOODS: DAIRY PRODUCTS (FRESH)
- 385 FOODS, FROZEN
- 390 FOODS: PERISHABLE
- 393 FOODS: STAPLE GROCERY & GROCERY MISCELLANEOUS
- 395 FORMS, CONTINUOUS: COMPUTER PAPER, FORM LABELS
- 400 FOUNDRY CASTINGS, EQUIPMENT, AND SUPPLIES
- 405 FUEL, OIL, GREASE AND LUBRICANTS
- 410 FURNITURE: HEALTH CARE AND HOSPITAL FACILITY
- 415 FURNITURE: LABORATORY
- 420 FURNITURE: CAFETERIA, DORMITORY, LIBRARY
- 425 FURNITURE: OFFICE
- 430 GASES, CONTAINERS, EQUIPMENT: LABORATORY, MEDICAL
- 435 GERMICIDES, CLEANERS, FOR HEALTH CARE
- 440 GLASS AND GLAZING SUPPLIES
- 445 HAND TOOLS (POWERED AND NON-POWERED), ACCESSORIES
- 450 HARDWARE AND RELATED ITEMS
- 460 HOSE AND SUPPLIES: INDUSTRIAL/COMMERCIAL/GARDEN
- 465 HOSPITAL & SURGICAL EQUIPMENT, INSTRUMENTS, SUPPLIES
- 470 HOSPITAL HANDICAP & RELATED SPECIALIZED EQUIPMENT
- 475 HOSPITAL, SURGICAL, & RELATED MEDICAL ACCESSORIES
- 485 JANITORIAL SUPPLIES, GENERAL LINE
- 490 LABORATORY EQUIPMENT & ACCESSORIES (GENERAL USE)
- 493 LABORATORY EQUIPMENT: BIOCHEMISTRY, CHEMISTRY
- 495 LABORATORY EQUIPMENT: BIOLOGY, GEOLOGY, ZOOLOGY
- 500 LAUNDRY & DRY CLEANING EQUIPMENT, PARTSCOMMERCIAL
- 505 LAUNDRY AND DRY CLEANING COMPOUNDS AND SUPPLIES
- 510 LAUNDRY TEXTILES AND SUPPLIES
- 515 LAWN MAINTENANCE EQUIPMENT, ACCESSORIES, & PARTS
- 520 LEATHER AND RELATED EQUIPMENT, PRODUCTS
- 525 LIBRARY & ARCHIVAL EQUIPMENT, MACHINES, & SUPPLIES
- 530 LUGGAGE, BRIEF CASES, PURSES AND RELATED ITEMS
- 540 LUMBER AND RELATED PRODUCTS
- 545 MACHINERY AND HARDWARE, INDUSTRIAL
- 550 MARKERS, PLAQUES AND TRAFFIC CONTROL DEVICES
- 555 MARKING AND STENCILING DEVICES
- 556 MASS TRANSPORTATION - TRANSIT BUS
- 557 MASS TRANSPORTATION - TRANSIT BUS PARTS
- 558 MASS TRANSPORTATION - RAIL VEHICLES AND SYSTEMS
- 559 MASS TRANSPORTATION - RAIL VEHICLE PARTS
- 560 MATERIAL HANDLING AND STORAGE EQUIPMENT
- 565 MATTRESS MANUFACTURING MACHINERY AND SUPPLIES
- 570 METALS: BARS, PLATES, RODS, SHEETS, STRIPS, TUBING
- 575 MICROFICHE AND MICROFILM EQUIPMENT AND SUPPLIES
- 578 MISCELLANEOUS PRODUCTS
- 580 MUSICAL INSTRUMENTS, ACCESSORIES, AND SUPPLIES
- 590 NOTIONS AND SEWING ACCESSORIES AND SUPPLIES
- 595 NURSERY STOCK, EQUIPMENT, AND SUPPLIES
- 600 OFFICE MACHINES, EQUIPMENT, AND ACCESSORIES
- 605 OFFICE MECHANICAL AIDS, SMALL MACHINES
- 610 OFFICE SUPPLIES: CARBON PAPER & RIBBONS, ALL TYPES
- 615 OFFICE SUPPLIES, GENERAL
- 620 OFFICE SUPPLIES: ERASERS, INK, LEAD, PENS, PENCILS
- 625 OPTICAL EQUIPMENT, ACCESSORIES, AND SUPPLIES
- 630 PAINT, PROTECTIVE COATINGS, VARNISH, WALLPAPER
- 635 PAINTING EQUIPMENT AND ACCESSORIES
- 640 PAPER AND PLASTIC PRODUCTS, DISPOSABLE
- 645 PAPER (FOR OFFICE AND PRINT SHOP USE)
- 650 PARK, PLAYGROUND, RECREATIONAL & POOL EQUIPMENT
- 652 PERSONAL HYGIENE & GROOMING EQUIPMENT AND SUPPLIES
- 655 PHOTOGRAPHIC EQUIPMENT AND SUPPLIES
- 658 PIPE AND TUBING
- 659 PIPE AND TUBING FITTINGS
- 660 PIPES, TOBACCOS, SMOKING & ALCOHOLIC BEVERAGES
- 665 PLASTICS, RESINS, FIBERGLASS: CONSTRUCTION, FORMING, LAMINATING, AND MOLDING EQUIPMENT, ACCESSORIES, AND SUPPLIES
- 670 PLUMBING EQUIPMENT, FIXTURES, AND SUPPLIES
- 675 POISONS: AGRICULTURAL AND INDUSTRIAL
- 680 POLICE EQUIPMENT AND SUPPLIES
- 685 POULTRY EQUIPMENT AND SUPPLIES
- 690 POWER GENERATION EQUIPMENT, ACCESSORIES & SUPPLIES

PLEASE CHECK THE APPROPRIATE BOX FOR ITEMS OR SERVICES YOU CAN PROVIDE.

CODE DESCRIPTION

- 691 POWER TRANSMISSION EQUIP-ELECTRICAL, MECHANICAL, AIR & HYDRAULIC
- 700 PRINTING PLANT EQUIPMENT AND SUPPLIES (EXCEPT PAPERS)
- 710 PROSTHETIC DEVICES, HEARING AIDS, AUDITORY TESTING EQUIPMENT, ETC.
- 715 PUBLICATIONS AND AUDIOVISUAL MATERIALS (PREPARED MATERIALS ONLY)
- 720 PUMPING EQUIPMENT AND ACCESSORIES
- 725 RADIO COMMUNICATION, TELEPHONE, AND TELECOMMUNICATION EQUIPMENT
- 730 RADIO COMMUNICATION & TELECOMMUNICATION TESTING, MEASURING EQUIP
- 735 RAGS, SHOP TOWELS, AND WIPING CLOTHS
- 740 REFRIGERATION EQUIPMENT AND ACCESSORIES
- 745 ROAD AND HIGHWAY BUILDING MATERIALS (ASPHALTIC)
- 750 ROAD AND HIGHWAY BUILDING MATERIALS (NOT ASPHALTIC)
- 755 ROAD AND HIGHWAY EQUIPMENT AND PARTS: ASPHALT AND CONCRETE
- 760 ROAD AND HIGHWAY EQUIPMENT: EARTH HANDLING, GRADING, MOVING, ETC.
- 765 ROAD AND HIGHWAY EQUIPMENT: OTHER
- 770 ROOFING
- 775 SALT (SODIUM CHLORIDE) (SEE CLASS 393 FOR TABLE SALT)
- 780 SCALES AND WEIGHING APPARATUS
- 785 SCHOOL EQUIPMENT AND SUPPLIES
- 790 SEED, SOD, SOIL, AND INOCULANTS
- 795 SEWING ROOM AND TEXTILE MACHINERY, AND ACCESSORIES
- 800 SHOES AND BOOTS
- 801 SIGNS, SIGN MATERIALS, SIGN MAKING EQUIPMENT
- 803 SOUND SYSTEMS, COMPONENTS: GROUP INTERCOM, MUSIC, PUBLIC ADDRESS
- 805 SPORTING GOODS, ATHLETIC EQUIPMENT & ATHLETIC FACILITY EQUIPMENT
- 810 SPRAYING EQUIPMENT (EXCEPT HOUSEHOLD, NURSERY PLANT, AND PAINT)
- 815 STEAM AND HOT WATER FITTINGS, ACCESSORIES, AND SUPPLIES
- 820 STEAM AND HOT WATER BOILERS AND STEAM HEATING EQUIPMENT
- 825 STOCKMAN EQUIPMENT AND SUPPLIES
- 830 TANKS (METAL, WOOD, AND SYNTHETIC MATERIALS): MOBILE, PORTABLE, STATIONARY, AND UNDERGROUND TYPES
- 832 TAPE (NOT DATA PROCESSING, MEASURING, OPTICAL, SEWING, SOUND, OR VIDEO)
- 840 TELEVISION EQUIPMENT AND ACCESSORIES
- 845 TESTING APPARATUS AND INSTRUMENTS (NOT ELECTRICAL OR ELECTRONIC)
- 850 TEXTILES, FIBERS, HOUSEHOLD LINENS, AND PIECE GOODS
- 855 THEATRICAL EQUIPMENT AND SUPPLIES
- 860 TICKETS, COUPON BOOKS, SALES BOOKS, STRIP BOOKS, ETC.
- 863 TIRES AND TUBES
- 864 TRAIN CONTROLS, ELECTRONIC
- 865 TWINE
- 870 VENETIAN BLINDS, AWNINGS, AND SHADES
- 875 VETERINARY EQUIPMENT AND SUPPLIES
- 880 VISUAL EDUCATION EQUIPMENT AND SUPPLIES
- 883 VOICE RESPONSE SYSTEMS
- 885 WATER AND WASTEWATER TREATING CHEMICALS
- 890 WATER SUPPLY, GROUNDWATER, SEWAGE TREATMENT, & RELATED EQUIPMENT
- 895 WELDING EQUIPMENT AND SUPPLIES
- 898 X-RAY AND OTHER RADIOLOGICAL EQUIPMENT AND SUPPLIES (MEDICAL)
- 905 AIRCRAFT OPERATIONS SERVICES
- 906 ARCHITECTURAL SERVICES, PROFESSIONAL
- 907 ARCHITECTURAL AND ENGINEERING SERVICES, NON-PROFESSIONAL
- 908 BOOKBINDING, REBINDING, AND REPAIRING
- 909 BUILDING CONSTRUCTION SERVICES, NEW
- 910 BUILDING MAINTENANCE AND REPAIR SERVICES
- 912 CONSTRUCTION SERVICES, GENERAL

CODE DESCRIPTION

- 913 CONSTRUCTION SERVICES, HEAVY
- 914 CONSTRUCTION SERVICES, TRADE (NEW CONSTRUCTION)
- 915 COMMUNICATIONS AND MEDIA RELATED SERVICES
- 918 CONSULTING SERVICES
- 920 DATA PROCESSING SERVICES AND SOFTWARE
- 924 EDUCATIONAL SERVICES
- 925 ENGINEERING SERVICES, PROFESSIONAL
- 926 ENVIRONMENTAL AND ECOLOGICAL SERVICES
- 928 EQUIPMENT MAINTENANCE AND REPAIR SERVICES FOR AUTOMOBILES, TRUCKS, TRAILERS, TRANSIT BUSES AND OTHER VEHICLES
- 929 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - AGRICULTURAL, HEAVY INDUSTRIAL EQUIPMENT, AND MARINE EQUIPMENT
- 931 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - APPLIANCE, ATHLETIC, CAFETERIA, FURNITURE, MUSICAL INSTRUMENTS, AND SEWING EQUIPMENT
- 934 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - LAUNDRY, LAWN, PAINTING, PLUMBING, AND SPRAYING EQUIPMENT
- 936 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - GENERAL EQUIPMENT
- 938 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - HOSPITAL, LABORATORY, AND TESTING EQUIPMENT
- 939 EQUIPMENT MAINTENANCE AND REPAIR SERVICES - OFFICE, PHOTOGRAPHIC, AND RADIO/TELEVISION EQUIPMENT
- 940 EQUIPMENT MAINTENANCE AND REPAIR - RAILROAD
- 941 EQUIPMENT MAINTENANCE AND REPAIR - POWER GENERATION
- 945 FISHING, HUNTING, TRAPPING, GAME PROPAGATION SERVICES
- 946 FINANCIAL SERVICES
- 947 FORESTRY SERVICES
- 948 HEALTH RELATED SERVICES (FOR HUMAN SERVICES SEE CLASS 952)
- 952 HUMAN SERVICES
- 953 INSURANCE, ALL TYPES
- 954 LAUNDRY AND DRY CLEANING SERVICES
- 956 LIBRARY SERVICES
- 958 MANAGEMENT SERVICES
- 959 MARINE CONSTRUCTION SERVICES; MARINE EQUIPMENT MAINTENANCE AND REPAIR; RELATED MARINE SERVICES
- 961 MISCELLANEOUS PROFESSIONAL SERVICES
- 962 MISCELLANEOUS SERVICES
- 965 PRINTING PREPARATIONS: ETCHING, PHOTOENGRAVING, AND PREPARATION OF MATS, NEGATIVES AND PLATES
- 966 PRINTING AND RELATED SERVICES
- 968 PUBLIC WORKS AND RELATED SERVICES
- 971 REAL PROPERTY RENTAL OR LEASE
- 975 RENTAL OR LEASE SERVICES OF EQUIPMENT - AGRICULTURAL, AIRCRAFT, AUTOMOTIVE, HEAVY EQUIPMENT, AND MARINE EQUIPMENT
- 977 RENTAL OR LEASE SERVICES OF EQUIPMENT - APPLIANCES, CAFETERIA, FILM, FURNITURE, HARDWARE, MUSICAL, SEWING, AND WINDOW AND FLOOR COVERINGS
- 979 RENTAL OR LEASE SERVICES OF EQUIPMENT - ENGINEERING, HOSPITAL, LABORATORY, PRECISION INSTRUMENTS, REFRIGERATION, SCALES, AND TESTING EQUIPMENT
- 981 RENTAL OR LEASE OF EQUIPMENT - GENERAL EQUIPMENT
- 983 RENTAL OR LEASE SERVICES OF EQUIPMENT - CLOTHING, JANITORIAL, LAUNDRY, LAWN, PAINTING, SPRAYING, AND TEXTILE EQUIPMENT
- 984 RENTAL OR LEASE SERVICES OF COMPUTERS, DATA PROCESSING, AND WORD PROCESSING EQUIPMENT
- 985 RENTAL OR LEASE SERVICES OF EQUIPMENT - OFFICE, PHOTOGRAPHIC, PRINTING, RADIO/TELEVISION/TELEPHONE EQUIPMENT
- 988 ROADSIDE, GROUNDS, RECREATIONAL AND PARK AREA SERVICES
- 989 SAMPLING AND SAMPLE PREPARATION SERVICES (FOR TESTING)
- 990 SECURITY, FIRE, SAFETY, AND EMERGENCY SERVICES
- 992 TESTING AND CALIBRATION SERVICES
- 998 SALE OF SURPLUS & OBSOLETE ITEMS