

LOUISIANA UNIFIED CERTIFICATION PROGRAM - DBE CERTIFICATION EXPANSION OF BUSINESS SERVICES REQUEST FORM

Legal Name: _____

Trade Name (DBA): _____

Contact Person: _____ Title: _____

Primary Phone: _____ Secondary Phone: _____

E-Mail: _____ Website: _____

Requested Business Description (Limit to 500 characters.)

Requested NAICS Codes

For a complete listing of NAICS codes, visit <http://www.census.gov/eos/www/naics>. Please, list the NAICS codes you would like to either add or remove below.

	NAICS	Brief Description		DOTD Work Codes	Brief Description
<input type="checkbox"/> Add <input type="checkbox"/> Remove			<input type="checkbox"/> Add <input type="checkbox"/> Remove		
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<input type="checkbox"/> Add <input type="checkbox"/> Remove			<input type="checkbox"/> Add <input type="checkbox"/> Remove		

DECLARATION

This form must be signed by the eligible owner with the most ownership interest in the Firm applying for an Expansion of Business Services.

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 certify and declare, under penalty of perjury, under the laws of the State of Louisiana, that the foregoing is true and correct.

Signed at:

CITY STATE

This _____ day of _____, 20_____
DATE MONTH YEAR

OWNER'S SIGNATURE

PRINTED NAME TITLE

NOTARY CERTIFICATE

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20_____
DATE MONTH YEAR

by _____
OWNER NAME

SIGNATURE OF NOTARY PUBLIC

TITLE

(Seal)

My Appointment Expires _____

DOCUMENT CHECKLIST

Thank you for completing the Expansion of Business Services Request Form. Copies of the documents listed below are required and must be included with the request form.

For All Requests

- Resume(s) of key personnel who will be performing the requested service(s), including updated resume(s) of the disadvantaged owner(s)
- List of equipment used to perform the requested service(s), including specialized software
- Copies of signed & executed contracts or invoices verifying the performance of the requested services for additional NAICS or DOTD work codes.
- Copies of specialty license(s) pertaining to the requested service(s)

If you are requesting services in the following categories, please, provide the additional documentation, as follows:

Retail Firms

- Current list of inventory
- Vendor agreements or copies of invoices from vendors for products that are retailed

Wholesaler Firms

- Wholesaler/Distributor agreements
- Copies of invoices from vendors for products being wholesale

Trucking Firms

- Louisiana Department of Transportation permit for each truck owned or operated by firm
- Commercial Driver's License (CDL) for all drivers
- Insurance Agreements for each truck owned or operated by firm
- Title(s) and registration certificate(s) for each truck owned or operated by firm

Reminder: Please, include the supporting documentation with your completed Expansion of Business Services Request Form, and email or mail the package to:

**Rhonda.Wallace@la.gov or Stephen.peychaud@la.gov (LADOTD Headquarters Firms)
Shirley.Ard@la.gov (LADOTD New Orleans firms)**

Louisiana Department of Transportation & Development
Attention: Compliance Programs – DBE Certification Office
P.O. Box 94245
Baton Rouge, LA 70804-9245

If you have any questions about the process, please, you may contact the DBE Office at (225) 379-1382.