

**N.C. DEPARTMENT OF ADMINISTRATION
OFFICE FOR HISTORICALLY UNDERUTILIZED BUSINESSES**

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Website: <https://ncadmin.nc.gov/businesses/hub> Email Address: huboffice.doa@doa.nc.gov

DOT DBE / NC HUB RECIPROCITY APPLICATION



DBE Firm Name: _____ **Federal Tax ID** _____

Email Address: _____

You are using this reciprocity application because you have met the requirements for DBE Certification set forth in the Code of Federal Regulations (CFR) 49 part 26 of the US Department of Transportation DBE Program. To participate in the NC HUB/DBE Reciprocity Program, please follow the instructions below:

Department of Transportation (DOT) State Name: _____

- | | |
|--------------------------------------|------------------------|
| <input type="checkbox"/> DBE Program | Expiration Date: _____ |
| <input type="checkbox"/> WBE Program | Expiration Date: _____ |
| <input type="checkbox"/> MBE Program | Expiration Date: _____ |

To get started, you must register your business electronically in the electronic Vendor Portal (eVP):

<https://vendor.ncgov.com/vendor/login>, Click “Vendor Not Registered. Register Now” Complete the registration process. In addition, you are required to submit the following documentation (below) to the HUB Office within 30 days of your on-line request for certification.

**Failure to submit the required documents within the specified time will result in an administrative withdrawal. All required documents must be addressed. (N/A's will not be accepted)*

**If any of the documentation required does not pertain to you or your business, please provide an explanation at the time of submission on your company's letterhead as to why the documentation requested does not pertain to you or your company.*

<input checked="" type="checkbox"/>	All Applicants are required to submit the following documents:
<input type="checkbox"/>	Approval letter from your home state's Department of Transportation
<input type="checkbox"/>	Current Copy of proof of citizenship or Permanent Residence (Birth Certificate, Passport, Voter's Registration Card, Green Card, Military ID, or Driver's License.
<input type="checkbox"/>	Proof of Ethnicity, based upon the ethnic groups identified in N.C.G.S. § 143-128.4 (b): Black, Hispanic, American Indian, or Asian American. Provide a copy of your Passport, Green Card, Birth Certificate, if none of these documents prove ethnicity, then complete a signed and notarized Ethnicity Affidavit .
<input type="checkbox"/>	Proof of disability, if applicable (Please provide a Disability Affidavit , note from your doctor or US Veterans Affairs disability determination letter)

I understand that the HUB Office may access all publicly available information in reviewing my firm's application.

Signature of Owner

Date

Printed Name of Owner

NOTE: TO AVOID DELAY IN PROCESSING YOUR CERTIFICATION, PLEASE CHECK YOUR APPLICATION, SUPPORTING DOCUMENTS TO ENSURE ALL REQUIRED INFORMATION IS INCLUDED AND REGISTER IN eVP <https://vendor.ncgov.com/vendor/login>, Click “Vendor Not Registered. Register Now”

Effective: 2/2018
Revised 8/2018