

Printed Name of Owner(s)

## NC SMALL BUSINESS ENTERPRISE PROGRAM AFFIRMATION FORM

SMALL BUS ENTERPRISE PR	INESS OGRAM	Business Name:	Federal Tax ID	
Historically	Underut oonsible f	ilized Businesses (known as or developing and making a	NCSBE) Program is part of the North Carolina Office for the HUB Office). The NCSBE Program is an entity which available a listing of certified small business enterprises in	
	on of a c	ertified Small Business Ente	ss Enterprise Program is reaching out to verify you meet rprise as defined by the NCSBE standards. Eligibility	
• The	e busines e busines	s must be based in North C s' annual income does not s must have less than 100 e s must be organized for pro	exceed \$1,500,000, after cost of Goods Sold is deducted. employees.	
Please com fax at 919-			urn to the NCSBE Office at <a href="mailto:hub.ncsbe@doa.nc.gov">hub.ncsbe@doa.nc.gov</a> or by	
NC Small B	usiness E	nterprise Criteria:		
Yes	No	My business is based ir	n North Carolina.	
	Yes No My business' annual net income is \$1,500,000 or less.			
Yes	es No My business has 100 or less employees.			
Yes	No	My business is organized for profit.		
The NC Sm	all Busin	ess Enterprise Program ma	y require documentation to verify eligibility.	
Signature of Owner			 Date	

Additional Owner(s)