

**Disadvantaged Business Enterprise Program  
Title 49 of the Code of Federal Regulations, Part 26**

# **INTERSTATE CERTIFICATION REQUEST**

## **NORTH CAROLINA UNIFIED CERTIFICATION PROGRAM**

The purpose of the interstate certification policy is to facilitate certification for firms currently certified in other states. Please note that before seeking DBE certification in North Carolina, firms must be certified in their home state.

**PLEASE NOTE:** Interstate certification is not automatic reciprocity.

Interstate applicants must provide North Carolina with a complete copy of their original application form (submitted to their home state), including all supporting documentation and any correspondence submitted to the home state and other states regarding their DBE certification.

**To complete this document:**

1. Complete Section 1 Company Information.
2. Review and check the required document boxes in Section 2.
3. Provide all required documents from Section 2.
4. Sign and date the Interstate Certification Declaration.
5. Submit the entire packet with supporting documents to the certifying agency.
6. Documents can be submitted to the NC UCP via fax, mail or email.

North Carolina Department of Transportation  
Unified Certification Program  
1511 Mail Service Center  
Raleigh, NC 27699-1500  
Fax: 919-508-1818  
Email: [lpowell23@ncdot.gov](mailto:lpowell23@ncdot.gov)

More information is also available on the Connect NCDOT website  
<https://connect.ncdot.gov/business/SmallBusiness/>

## SECTION 1: COMPANY INFORMATION

1. Legal name of business:		2. Other name(s) used by business:	
3. Website ( <i>if have one</i> ):		4. Federal tax ID:	
5. Company phone #:	6. Mobile phone #:	7. Company fax #:	
8. E-mail address:		9. County	
10. Street address of company (no P.O. box):		City:	State: Zip:
11. Mailing address of company (if different):		City:	State: Zip:
12. List Owners & Ownership Percentages (include additional pages if necessary):			

## SECTION 2: SUPPORTING DOCUMENTS

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

**All Applicants Must Submit:**

- A copy of your original certification application as submitted to your home state
- A copy of your home state certification document ( letter or certificate )
- A copy of all supporting documents submitted to your home state
- A copy of all affidavits, declarations, and change notices submitted to your home state

### SECTION 3: DECLARATION

I declare, that as an owner, I have full knowledge of the operation of my firm and that to the best of my knowledge and belief, the information previously submitted to my home state regarding my Disadvantaged Business Enterprise certification, confirms that I remain economically disadvantaged.

I declare, under penalty of law, that I have submitted all of the information required by 49 CFR 26.85(c). This information is complete and identical to the information which served as the basis for my home state certification. Further, I declare under penalty of perjury, that all facts in my most recent on-site visit report remain true and correct.

I declare that my firm meets the Small Business Administration (SBA) criteria for being a small business concern and its number of employees and average annual gross receipts (as defined by the SBA rules) over the firm's previous three fiscal years do not exceed the work type limit.

Legal name of business:	
Firm's Gross Income for the previous calendar year:	
Firm's Number of employees:	

I declare that each owner on whom the firm is relying for certification in the program does not exceed the personal net worth limit of \$1.32 million.

I recognize and accept the statements above governing the consideration of this declaration and the maintenance of my firm's certified status. I agree to provide written notice to the recipient agency or Unified Certified Program (UCP) 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.). By my signature, I declare that I have read and understand this statement and that I have the authority to sign this declaration and that the responses, foregoing statements, and accompanying documents are true, complete, and correct and include all materials requested under penalty of perjury under the laws of the United States; and further that a material or false statement or omission made in connection with the 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 laws.

Name of Firm: \_\_\_\_\_

Owner ( Print Name & Title ): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***\*Attach additional signature pages for each disadvantaged owner.***