

AFFIDAVIT

(Declaración Jurada)

Small Business Enterprise Program (SBEP)

(Programa de Pequeños Negocios)

The undersigned swears (and affirms) that the foregoing statements concerning the location of the Business, annual sales volume, number of employees and other expressed criteria accurately describe the operations of my business:

(El abajo-firmado jura y (afirma) que la precedente declaración acerca de la localización del negocio, volumen de ventas anuales, números de empleados y otros criterios expresados describen exactamente las operaciones de mi negocio):

(Name of Business)
(Nombre del Negocio)

(Print Name of Owner)
(Imprima Nombre del Dueño)

(Number & Street)
(Número & Calle)

_____	FLORIDA	_____
(City)	(State)	Zip
(Ciudad)	(Estado)	(Zona Postal)

(Telephone No.)
(Número de Teléfono)

(Fax No.)
(Número de Fax)

(E-Mail Address)
(Dirección del correo electrónico)

Federal Employee ID Number (FEIN): Complete and return the attached W-9 Form.

(Número de Identificación Federal De Empleado (FEIN): Termine y regrese la Forma W-9 (incluida)

Type of Industry/Nature of Business:
(Clase de industria/Naturaleza del negocio):

Date Firm was Established:
(Fecha Empresa fue Establecida):

PLEASE ADDRESS REPLY TO:
Pinellas County Economic Development
13805 58th Street North
Suite 1-200
Clearwater, Florida 33760
Phone (888) 759-5627
Fax (727) 464-7053
www.pced.org



Type of Ownership (Check) Corporation Partnership Sole Proprietor
 Estructura Legal (Marque): (Corporación) (Sociedad Corporativa) (Propetario Unico)

Annual Sales Volume for the past three (3) calendar years:
 (Volumen de Ventas Anuales por los pasados tres (3) años calendario):

Year 1 Ending (Final Año 1) \$ _____
 Year 2 Ending (Final Año 2) \$ _____
 Year 3 Ending (Final Año 3) \$ _____

Three (3) year average annual sales volume
 (Promedio de tres (3) años volumen de ventas anual)

\$ _____

Number of employees: _____
 (Número de empleados)

Is your business able to accept payment by Credit Card? Yes No
 (Puede su negocio aceptar pagos con Tarjetas de Credito?) (Si)

Furthermore, my business meets the following criteria:
 (Además, mí negocio cumple con los siguientes requisitos):

- The business serves a commercially useful function.
 (El negocio sirve una function comercialmente útil).
- The business is principally domiciled in the County Limits of Pinellas, FL.
 (El negocio esta principalmente ubicado en los Limites del Condado de Pinellas, FL).
- The annual sales and number of employees of the business does not exceed maximum three year average gross revenue of two (2) million and a maximum of fifty (50) employees.
 (Las ventas anuales y el número de empleados del negocio no sobrepasan el promedio máximo de tres (3) años del ingreso bruto de dos (2) millones y un máximo de cincuenta (50) empleados).

I understand that this affidavit affords my business to a SBEP status for a period of three (3) years. The SBEP status may be renewed subject to written notice from the County and my business for additional terms. This option may be exercised only if my business continues to qualify under the SBEP criteria and status has not been revoked.

(Yo entiendo que por esta Declaración Jurada le permite a mi negocio estar bajo la categoría de Empresa de Pequeños Nogocios (SBE) por un periodo de tres (3) años. La categoría de SBE puede ser renovada por término adicionales, sujeto a un aviso por escrito del Condado y mi negocio. Esta opción puede ser sólo si mi negocio continúa siendo clasificado bajo los criterios de SBE y su clasificación no ha sido revocada.).

SBEP status may be revoked for the following reasons:
 (La categoría de SBE puede ser revocada por las siguientes razones):

- Fraudulently obtaining, attempting to obtain or aiding another in obtaining SBEP Status.
 (Conseguir fraudulentament, atentar conseguir o ayudar a otros a conseguir la categoría de SBE).
- Willfully making a false statement, whether by affidavit, report or other representation to a Pinellas County official or employee for the purpose of obtaining SBEP status.
 (Deliberadamente hace una declaración falsa sea por affidavit, informe y otra representación a un official del Condado de Pinellas or empleado con el propósito de obtener la categoría de SBE).

- Willfully obstructing, impeding or attempting to obstruct or impede any Pinellas County official or employee whom is investigating the qualifications of a business entity, which has requested SBEP status. (Interferir deliberadamente, impidiendo o intentar obstruir o impedir que cualquier oficial o empleado del Condado de Pinellas investigue las cualificaciones del negocio, que está solicitando la categoría de SBE).

ANY MATERIAL MISREPRESENTATION WILL BE GROUNDS FOR INITIATING ACTION UNDER FEDERAL OR STATE LAWS CONCERNING FALSE STATEMENTS.
 (CUALQUIER ALTERACION WL MATERIAL PUEDE SER CASTIGADO O DEMANDADO BAJO LAS LEYES FEDERALES O ESTATALES RELACIONADO A LOS TESTIMONIOS FALSOS.

SIGNATURE: _____ DATE: _____
 (FIRMA) (FECHA)

PRINT NAME _____ TITLE: _____
 (IMPRIMA SU (TITULO)
 NOMBRE)

On this _____ (day) of _____ before me appeared
 En este _____ (dia) de _____ 200 __, Delante de mi comparece

(name) _____ to me personally known
 (nombre) _____ A quien conozco

or produced _____ as identification, who being duly sworn, did execute the
 o produce _____ como identificación, quien ha sido debidamente jurado

foregoing affidavit, and did state that he/she was properly authorized by
 y ejecuta el affidavit anterior y asi declara que el.ella está debidamente autorizado por

(name of business) _____
 (nombre negocio)

to execute the affidavit and did so as a free act and deed.
 (para cumplir con las formalidades del affidavit y hacerlo como un acto y acción libre.

(SEAL)
 Notary Public: _____
 My Commission Expira: _____

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	<input type="checkbox"/> Exempt from backup withholding	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number										
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Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶	Date ▶
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Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,