



**2 MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES**

TYPE OF PARTICIPATION REQUESTED(check all that apply):

- Minority Business Enterprise (MBE)
- Women Business Enterprise (WBE)
- Disadvantaged Business Enterprise (DBE)
- Disabled Veteran Business Enterprise (DVBE)

DBEs and DVBEs wishing to participate must be currently certified by another authorized governmental certifying agency and must submit a copy of the certification with your application

Complete the following questions:

- |  | Yes                              | No                    |
|--|----------------------------------|-----------------------|
| a. Is your firm a minority and/or women <b>owned</b> business?   | <input checked="" type="radio"/> | <input type="radio"/> |
| b. Is your firm at least <b>51%</b> minority or women owned?   | <input checked="" type="radio"/> | <input type="radio"/> |
| c. Is your firm's daily business <b>operations controlled or managed by</b> one or more minorities or women? | <input checked="" type="radio"/> | <input type="radio"/> |

**3 OWNERSHIP INFORMATION (Click here for Required Documentation)**

- |                            |  |   |
|----------------------------|--|---|
| Race/Ethnicity of owner(s) | <input type="checkbox"/> Black/African American    | <input checked="" type="checkbox"/> Hispanic/Latino |
|                            | <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> American Indian            |
|                            | <input type="checkbox"/> Filipino                  |   |

- Gender of Owner:  Male  Female

- |                    |  |   |
|--------------------|--|---|
| Type of Ownership: | <input type="radio"/> Sole Proprietorship    | <input type="radio"/> Non-Profit                |
|                    | <input type="radio"/> Partnership            | <input type="radio"/> Franchise                 |
|                    | <input checked="" type="radio"/> Corporation | <input type="radio"/> Limited Liability Company |
|                    |  |   |

List owners and their percentage of interest

Name	Race/Ethnicity	Gender	% of Ownership	U.S. Citizen
Liliana Aliyazicioglu	Hispanic/Latino	Female	51	Yes

Gencaga Aliyazicioglu	Male	48	Yes
Dennis Dillman	Male	1	Yes

**4 CERTIFICATION BY ANOTHER PUBLIC AGENCY**

Is our firm currently certified as a MBE, WBE, DBE, DVBE or 8(A) by another public Agency?      Yes      No  
     

You may be eligible for CBE participation under the Federal Small Business Administration 8(A) definition as a small business which is unconditionally owned and controlled by one or more socially and economically disadvantaged individuals who are of good character and citizens of the United States, and which demonstrates potential for success. For certification as an 8(A) visit the Office of Small Business Administration at <http://www.sba.gov/library/cfrs/13cfr124.html>

**CHECK TYPE OF CERTIFICATION**

Agency Name	Minority (MBE)	Women (WBE)	Dis-advantaged (DBE)	Disabled Veteran (DVBE)	Certification Expiration Date (mm/dd/yy)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**5 STANDARD INDUSTRIAL CLASSIFICATION (SIC) DESCRIPTION**

Identifying a Standard Industrial Classification (SIC) description for your specific business type, specific industry and/or goods and services will help potential business partners and contracting agencies locate your firm from our CBE listing. List the appropriate SIC description of goods and/or services provided by your business. (A complete list of SIC descriptions and codes is available at the OAAC website [http://oaac.co.la.ca.us/SICcodes\\_Ndx.shtml](http://oaac.co.la.ca.us/SICcodes_Ndx.shtml) under the Local SBE Program, "Local SBE Links" or call our office at (877) 669-CBES to request assistance.)

SIC Description	Code
Engineering Services	8711
Architectural Services	8712
Surveying Services	8713

### **Ⓜ REQUIRED SUPPORT DOCUMENTS**

Include the following required documents with your certification application for each owner. Your application will be delayed without the required documents. Based upon your submitted information, it may be necessary for your business to submit additional supporting documentation to determine your eligibility.

For **MBE** and **WBE** participation, attach a copy of the following documents for each owner claiming minority and/or women owned status. Owners who are not U.S. citizens must submit proof of legal permanent residence.

#### **Proof of MINORITY status**

Examples of acceptable evidence are:

- birth certificate
- passport [if owner(s) from another country]
- naturalization data and proof of legal residency

#### **Proof of WOMEN status**

Examples of acceptable evidence are:

- birth certificate, and
- drivers license, or
- passport

In addition, submit the following copies of documentation for your **Type of Ownership**:

#### **Sole Proprietorship**

- License to do business or fictitious business name filing

#### **Partnership**

- License to do business or fictitious business name filing
- Partnership agreement
- Detailed business plan, if in business less than

#### **Corporation**

- License to do business or fictitious business name filing
- Article or Certificate of Incorporation and/or corporate bylaws

one year

- Detailed business plan, if in business less than one year

For **DBE** and **DVBE** participation, attach a copy of your certification from a County recognized governmental certifying agency (refer to part **4** )

## **7 ACKNOWLEDGEMENT OF SANCTIONS: COMMUNITY BUSINESS ENTERPRISE PROGRAM**

It is the policy of the County of Los Angeles Board of Supervisors that it is unlawful for any person to knowingly submit fraudulent information with the intent of receiving Community Business Enterprise (CBE) certification and avail themselves of any benefits for which they are not entitled.

This is to acknowledge that the undersigned, on behalf of himself or herself individually and on behalf of his or her business or organization, is fully aware of the following policy of the County of Los Angeles.

A. A person or business shall not:

1. Knowingly and with the intent to defraud, fraudulently obtain, retain, attempt to obtain or retain, or aid another in fraudulently obtaining or retaining, or attempting to obtain or retain, acceptance or certification as a community business enterprise; for the purposes of this article.
2. Willfully and knowingly make a false statement with the intent to defraud, whether by affidavit, report, or other representation, to a County official or employee for the purpose of influencing the acceptance or certification or denial of acceptance or certification of any entity as a minority and/or women owned business enterprise, or both.
3. Willfully and knowingly obstruct, impede, or attempt to obstruct or impede, any County official or employee who is investigating the qualifications of a business entity which has requested acceptance or certification as a community business enterprise.
4. Knowingly and with intent to defraud, fraudulently obtain, attempt or obtain, or aid another person or business in fraudulently obtaining or attempting to obtain, public monies to which the person or business is not entitled under this article.

B. Any person or business who violates the above shall be suspended from bidding on, or participating as a contractor, subcontractor, or supplier in any County contract or project in accordance to the provisions of Chapter 2.202 of the County Code (Determinations of Contractor Non-responsibility and Contractor Debarment).

C. No County agency with the powers to award contracts shall enter into any contract with any person or business suspended for violating this section during the period of the person's or business' suspension. No awarding department shall award a contract to any contractor who uses the services of any person or business as a subcontractor suspended for violating this section during the period of their person's or business' suspension.

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I understand and acknowledge, on behalf of him/herself, individual and on behalf of his/her business or organization, is fully aware of the above policy of the County of Los Angeles and declares under penalty of perjury under the laws of the State of California that the information is true and correct and that the foregoing statements are true and includes all material information necessary to identify and explain the operations of

Digital Mapping, Inc.  
(Name of Business)

and the ownership thereof.

\_\_\_\_\_  
(Owner/Principal Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Date)

Note: To avoid delays in processing your application, complete all necessary information, sign, date, include all required documents and submit to the address listed below:

County of Los Angeles, Office of Affirmative Action Compliance  
Community Business Enterprise Program  
1000 South Fremont Avenue  
Building A-9 East, 1st Floor  
Mail: Unit #24  
Alhambra, CA 91803

FOR OFFICIAL USE ONLY	Review file contents		Additional Information		Approved		Denied	
	Initial	Date	Initial	Date	Initial	Date	Initial	Date