

SOUTH CAROLINA UNIFIED CERTIFICATION PROGRAM (SCUCP)

Dear Business Owner:

Thank you for your interest in participating in the Unified Certification Program (UCP) of South Carolina for Small Business Enterprises (SBEs). As mandated by the United States Department of Transportation (USDOT) in the SBE Program, all USDOT recipients of federal financial assistance must participate in a statewide UCP.

The South Carolina Department of Transportation is charged with the responsibility of certifying firms and maintaining the database of certified SBEs for all USDOT recipients of South Carolina. The database is intended to expand the use of SBE firms by maintaining complete and current information on those businesses and the products and services they can provide to all USDOT recipients in South Carolina.

Please complete the attached application and supplemental questionnaire if you wish to be considered for SBE certification.

In order to avoid unnecessary delays, please complete all portions of the application and supplemental questionnaire, placing "N/A" next to items that are not applicable.

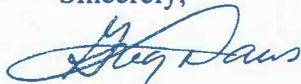
Incomplete applications/supplemental questionnaires will not be evaluated until such documents are submitted. We recommend keeping a copy of all submitted documents for your records.

The SBE application can be found at:

<https://www.scdot.org/business/pdf/businessDevelop/SBE-Welcome-application.pdf>

Please forward your completed certification packet to the Division of Minority and Small Business Affairs, 955 Park Street, Room 117, Columbia, SC 29201.

Sincerely,

A handwritten signature in blue ink that reads 'Greg Davis'.

Greg Davis
Director, Minority and Small Business Affairs

**INSTRUCTIONS FOR COMPLETING THE SCDOT Small Business Enterprise (SBE) PROGRAM
UNIFORM CERTIFICATION APPLICATION**

NOTE: If you require additional space for any question in this application, please attach additional sheets or copies as needed, taking care to indicate on each attached sheet/copy the section and number of this application to which it refers.

Section 1: CERTIFICATION INFORMATION

A. Prior/Other Certifications

Check the appropriate box indicating for which program your firm is currently certified. If you are already certified as a SBE, indicate in the appropriate box the name of the certifying agency that has previously certified your firm, and also indicate whether your firm has undergone an onsite visit. If your firm has already undergone an onsite visit/review, indicate the most recent date of that review and the state UCP that conducted the review.

B. Prior/Other Applications and Privileges

Indicate whether your firm or any of the persons listed has ever withdrawn an application for a SBE program or an SBA 8(a) or SDB program, or whether any have ever been denied certification, decertified, debarred, suspended, or had bidding privileges denied or restricted by any state or local agency or Federal entity. If your answer is yes, indicate the date of such action, identify the name of the agency, and explain fully the nature of the action in the space provided.

Section 2: GENERAL INFORMATION

A. Contact Information

- (1) State the name and title of the person who will serve as your firm's primary contact under this application.
- (2) State the legal name of your firm, as indicated in your firm's Articles of Incorporation or charter.
- (3) State the primary phone number of your firm.
- (4) State a secondary phone number, if any.
- (5) State your firm's fax number, if any.
- (6) State your firm's or your contact person's email address.
- (7) State your firm's website address, if any.
- (8) State the street address of your firm (i.e. the physical location of its offices -- not a post office box address).
- (9) State the mailing address of your firm, if it is different from your firm's street address.

B. Business Profile

- (1) In the box provided, briefly describe the primary business and professional activities in which your firm engages.
- (2) State the Federal Tax ID number of your firm as provided on your firm's filed tax returns, if you have one. This could also be the Social Security number of the owner of your firm.
- (3) State the date on which your firm was officially established, as stated in your firm's Articles of Incorporation or charter.
- (4) State the date on which you and/or each other owner took ownership of the firm.
- (5) Check the appropriate box that describes the manner in which you and each other owner acquired ownership of your firm. If you checked "Other," explain in the space provided.

- (6) Check the appropriate box that indicates whether your firm is "for profit."

NOTE: If you checked "No," then you do NOT qualify for the SBE program and therefore do not need to complete the rest of this application. The SBE program requires all participating firms be for-profit enterprises.

- (7) Check the appropriate box that describes the legal form of ownership of your firm, as indicated in your firm's Articles of Incorporation. If you checked "Other," briefly explain in the space provided.
- (8) Check the appropriate box that indicates whether your firm has ever existed under different ownership, a different type of ownership, or a different name. If you checked "Yes," specify which and briefly explain the circumstances in the space provided.
- (9) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time and part-time basis.
- (10) Specify the total gross receipts of your firm for each of the past five years, as declared in your firm's filed tax returns.

C. Relationships with Other Businesses

- (1) Check the appropriate box that indicates whether your firm is co-located at any of its business locations, or whether your firm shares a telephone number(s), a post office box, any office space, a yard, warehouse, other facilities, any equipment, or any office staff with any other business, organization, or entity of any kind. If you answered "Yes," then specify the name of the other firm(s) and briefly explain the nature of the shared facilities or other items in the space provided.
- (2) Check the appropriate box that indicates whether at present, or at any time in the past:
 - (a) Your firm has been a subsidiary of any other firm;
 - (b) Your firm consisted of a partnership in which one or more of the partners are other firms;
 - (c) Your firm has owned any percentage of any other firm; and
 - (d) Your firm has had any subsidiaries of its own.
- (3) Check the appropriate box that indicates whether any other firm has ever had an ownership interest in your firm.
- (4) If you answered "Yes" to any of the questions in (2)(a)-(d) or (3), identify the name, address and type of business for each.

D. Immediate Family Member Businesses

Check the appropriate box that indicates whether any of your immediate family members own or manage

another company. An "immediate family member" is any person who is your father, mother, husband, wife, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law. If you answered "Yes," provide the name of each relative, your relationship to them, the name of the company they own or manage, the type of business, and whether they own or manage the company.

Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (if your firm has more than one owner, provide completed copies of this section for each additional owner):

A. Background Information

- (1) Give the name of the owner.
- (2) State his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) State his/her home (street) address.
- (5) Check the appropriate box that indicates this owner's gender.
- (6) Check the appropriate box to indicate whether this owner is a U.S. citizen.
- (7) If this owner is not a U.S. citizen, check the appropriate box that indicates whether this owner is a lawfully admitted permanent resident. If this owner is neither a U.S. citizen nor a lawfully admitted permanent resident of the U.S., then this owner is NOT eligible for certification as a SBE owner. This, however, does not necessarily disqualify your firm altogether from the SBE program if another owner is a U.S. citizen or lawfully admitted permanent resident and meets the program's other qualifying requirements.

B. Ownership Interest

- (1) State the number of years, during which this owner has been an owner of your firm.
- (2) Indicate the dollar value of this owner's initial investment to acquire an ownership interest in your firm, broken down by cash, real estate, equipment, and/or other investment.
- (3) State the percentage of total ownership control of your firm that this owner possesses.
- (4) State the familial relationship of this owner to each other owner of your firm.
- (5) Indicate the number, percentage of the total, class, date acquired, and method by which this owner acquired his/her shares of stock in your firm.
- (6) Check the appropriate box that indicates whether this owner performs a management or supervisory function for any other business. If you checked "Yes," state the name of the other business and this owner's title or function held in that business.
- (7) Check the appropriate box that indicates whether this owner owns or works for any other firm(s) that has any relationship with your firm. If you checked "Yes," identify the name of the other business and this owner's title or function held in

that business. Briefly describe the nature of the business relationship in the space provided.

C. Economically Disadvantaged Status

NOTE: You only need to complete this section for each owner that is applying for SBE qualification (i.e. for each owner who is claiming to be "economically disadvantaged" and whose ownership interest is to be counted toward the control and 51% ownership requirements of the SBE program)

- (1) Indicate in the space provided the total Personal Net Worth (PNW) of each owner who is applying for SBE qualification. Use the PNW calculator form at the end of this application to compute each owner's PNW.
- (2) Check the appropriate box that indicates whether any trust has ever been created for the benefit of this disadvantaged owner. If you answered "Yes," briefly explain the nature, history, purpose, and current value of the trust(s).

Section 4: CONTROL

A. Identify your firm's Officers and Board of Directors:

- (1) In the space provided, state the name, title, of appointment, ethnicity, and gender of each officer of your firm.
- (2) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each individual serving on your firm's Board of Directors.
- (3) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above performs a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
- (4) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the officer or director, and the nature of his/her business relationship with that other firm.

B. Identify your firm's management personnel (by name, title, ethnicity, and gender) who control your firm in the following areas:

- (1) Making of financial decisions on your firm's behalf, including the acquisition of lines of credit, surety bonds, supplies, etc.;
- (2) Estimating and bidding, including calculation of cost estimates, bid preparation and submission;
- (3) Negotiating and contract execution, including participation in any of your firm's negotiations and executing contracts on your firm's behalf;
- (4) Hiring and/or firing of management personnel, including interviewing and conducting performance evaluations;

- (5) Field/Production operations supervision, including site supervision, scheduling, project management services, etc.;
 - (6) Office management;
 - (7) Marketing and sales;
 - (8) Purchasing of major equipment;
 - (9) Signing company checks (for any purpose); and
 - (10) Conducting any other financial transactions on your firm's behalf not otherwise listed.
 - (11) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
 - (12) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the name of the person, and the nature of his/her business relationship with that other firm.
- C. Indicate your firm's inventory in the following categories:**
- (1) **Equipment**
State the type, make and model, and current dollar value of each piece of equipment held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm.
 - (2) **Vehicles**
State the type, make and model, and current dollar value of each motor vehicle held and/or used by your firm. Indicate whether each vehicle is either owned or leased by your firm.
 - (3) **Office Space**
State the street address of each office space held and/or used by your firm. Indicate whether your firm owns or leases the office space and the current dollar value of that property or its lease.
 - (4) **Storage Space**
State the street address of each storage space held and/or used by your firm. Indicate whether your firm owns or leases the storage space and the current dollar value of that property or its lease.
- D. Does your firm rely on any other firm for management functions or employee payroll?**
Check the appropriate box that indicates whether your firm relies on any other firm for management functions or for employee payroll. If you answered "Yes," briefly explain the nature of that reliance and the extent to which the other firm carries out such functions.
- E. Financial Information**
- (1) **Banking Information**
 - (a) State the name of your firm's bank.
 - (b) Give the main phone number of your firm's bank branch.
 - (c) Give the address of your firm's bank branch.
 - (2) **Bonding Information**
 - (a) State your firm's Binder Number.
 - (b) State the name of your firm's bond agent and/or broker.
 - (c) Give your agent's/broker's phone number.
 - (d) Give your agent's/broker's address.
 - (e) State your firm's bonding limits (in dollars), specifying both the Aggregate and Project Limits.
- F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms securing the loan, if other than the listed owner:**
State the name and address of each source, the original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm.
- G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years:**
Indicate in the spaces provided, the type of contribution or asset that was transferred, its current dollar value, the person or firm from whom it was transferred, the person or firm to whom it was transferred, the relationship between the two persons and/or firms, and the date of the transfer.
- H. List current licenses/permits held by any owner or employee of your firm.**
List the name of each person in your firm who holds a professional license or permit, the type of permit or license, the expiration date of the permit or license, and the license/permit number and issuing State of the license or permit.
- I. List the three largest contracts completed by your firm in the past three years, if any.**
List the name of each owner or contractor for each contract, the name and location of the projects under each contract, the type of work performed on each contract, and the dollar value of each contract.
- J. List the three largest active jobs on which your firm is currently working.**
For each active job listed, state the name of the prime contractor and the project number, the location, the type of work performed, the project start date, the anticipated completion date, and the dollar value of the contract.

AFFIDAVIT & SIGNATURE

Carefully read the attached affidavit in its entirety. Fill in the required information for each blank space, and sign and date the affidavit in the presence of a Notary Public, who must then notarize the form.

SMALL BUSINESS ENTERPRISE PROGRAM
49 CFR PART 26.39

UNIFORM CERTIFICATION APPLICATION

ROADMAP FOR APPLICANTS

① **Should I apply?**

- Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$7.5 million in gross receipts averaged over a five-year period?
- Is your firm organized as a for-profit business?

⇒ If you answered "Yes" to all of the questions above, you may be eligible to participate in the SBE program.

③ **Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.**

④ **Where can I find more information?**

- SBA – <http://www.ntis.gov/naics> (provides a listing of NAICS codes) and <http://www.sba.gov/size/indextableofsize.html> (provides a listing of SIC codes)
- 49 CFR Part 26 (the rules and regulations governing the SBE program)

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 49 CFR Part 29, take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.

Section 1: CERTIFICATION INFORMATION

A. Prior/Other Certifications

Is your firm currently certified for any of the following programs? <i>(If Yes, check appropriate box(es))</i>	<input type="checkbox"/> DBE	Name of certifying agency:
	<input type="checkbox"/> 8(a)	Has your firm's state UCP conducted an on-site visit?
	<input type="checkbox"/> SDB	<input type="checkbox"/> Yes, on ___ / ___ / ___ State: _____ <input type="checkbox"/> No

B. Prior/Other Applications and Privileges

Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application for any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?

Yes, on ___ / ___ / ___ No

If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action:

Section 2: GENERAL INFORMATION

A. Contact Information

(1) Contact person and Title:		(2) Legal name of firm:			
(3) Phone #:	(4) Other Phone #:		(5) Fax #:		
(6) E-mail:		(7) Website <i>(if have one)</i> :			
(8) Street address of firm <i>(No P.O. Box)</i> :		City:	County/Parish:	State:	Zip:
(9) Mailing address of firm <i>(if different)</i> :		City:	County/Parish:	State:	Zip:

B. Business Profile

(1) Describe the primary activities of your firm:		(2) Federal Tax ID (if any):
(3) This firm was established on ___ / ___ / ___		(4) I/We have owned this firm since: ___ / ___ / ___
(5) Method of acquisition <i>(check all that apply)</i> :		
<input type="checkbox"/> Started new business <input type="checkbox"/> Bought existing business <input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other <i>(explain)</i>		
(6) Is your firm "for profit"? <input type="checkbox"/> Yes <input type="checkbox"/> No		⊗ STOP! If your firm is NOT for-profit, then you do NOT qualify for this program and do NOT need to fill out this application.

(7) Type of firm (check all that apply):

- Sole Proprietorship
- Partnership
- Corporation
- Limited Liability Partnership
- Limited Liability Corporation
- Joint Venture
- Other, Describe:

(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?
 Yes No
 If Yes, explain:

(9) Number of employees: Full-time Part-time Total

(10) Specify the gross receipts of the firm for the last 5 years:

Year	Total receipts \$
Year	Total receipts \$
Year	Total receipts \$
Year	Total receipts \$
Year	Total receipts \$

C Relationships with Other Businesses

(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity?
 Yes No
 .
 If Yes, identify: Other Firm's name: _____
 Explain nature of shared facilities:

(2) At present, or at any time in the past, has your firm:	(a) been a subsidiary of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(b) consisted of a partnership in which one or more of the partners are other firms? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(c) owned any percentage of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(d) had any subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No

(3) Has any other firm had an ownership interest in your firm at present or at any time in the past? Yes No

(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each (attach extra sheets, if needed):

	<u>Name</u>	<u>Address</u>	<u>Type of Business</u>
1.			
2.			
3.			

D. Immediate Family Member Businesses

Do any of your immediate family members own or manage another company? Yes No
 If Yes, then list (attach extra sheets, if needed):

	<u>Name</u>	<u>Relationship</u>	<u>Company</u>	<u>Type of Business</u>	<u>Own or Manage?</u>
1.					
2.					

Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below *(If more than one owner, attach separate sheets for each additional owner):*

A. Background Information

(1) Name:	(2) Title:	(3) Home Phone #:
(4) Home Address <i>(street and number)</i> : _____ City: _____ State: _____ Zip: _____		
(5) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
(6) U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
(7) Lawfully Admitted Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		

B. Ownership Interest

(1) Number of years as owner:	(2) Initial investment to acquire ownership interest in firm:										
(3) Percentage owned:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 10px;"><u>Type</u></td> <td style="text-align: right; padding-right: 10px;"><u>Dollar Value</u></td> </tr> <tr> <td style="padding-right: 10px;">Cash</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="padding-right: 10px;">Real Estate</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="padding-right: 10px;">Equipment</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="padding-right: 10px;">Other</td> <td style="text-align: right;">\$</td> </tr> </table>	<u>Type</u>	<u>Dollar Value</u>	Cash	\$	Real Estate	\$	Equipment	\$	Other	\$
<u>Type</u>	<u>Dollar Value</u>										
Cash	\$										
Real Estate	\$										
Equipment	\$										
Other	\$										
(4) Familial relationship to other owners:											
(5) Shares of Stock: <u>Number</u> <u>Percentage</u> <u>Class</u> <u>Date acquired</u> <u>Method Acquired</u>											
(6) Does this owner perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No											
If Yes, identify: Name of Business: _____ Function/Title: _____											
(7) Does this owner own or work for any other firm(s) that has a relationship with this firm <i>(e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No											
If Yes, identify: Name of Business: _____ Function/Title: _____											
Nature of Business Relationship: _____											

C. Complete this section only for each owner applying for SBE qualification (i.e. for each owner claiming to be economically disadvantaged)

(1) What is the Personal Net Worth (PNW) of the owner(s) applying for SBE qualification? <i>(Use and attach the Personal Financial Statement form at the end of this application; attach additional sheets if more than one owner is applying)</i>
(2) Has any trust been created for the benefit of this economically disadvantaged owner(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain <i>(attach additional sheets if needed)</i> :

Section 4: CONTROL

A. Identify your firm's Officers & Board of Directors *(If additional space is required, attach a separate sheet):*

	Name	Title	Date Appointed
(1) Officers of the Company	(a)		
	(b)		
	(c)		
	(d)		
	(e)		
(2) Board of Directors	(a)		
	(b)		
	(c)		
	(d)		
	(e)		

(3) Do any of the persons listed in (1) and/or (2) above perform a management or supervisory function for any other business? Yes No

If Yes, identify for each: Person: _____ Title: _____
 Business: _____ Function: _____

(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? Yes No

If Yes, identify for each: Firm Name: _____ Person: _____
 Nature of Business Relationship: _____

B. Identify your firm's management personnel who control your firm in the following areas *(If more than two persons, attach a separate sheet):*

	Name	Title
(1) Financial Decisions <i>(responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)</i>	a.	
	b.	
(2) Estimating and bidding	a.	
	b.	
(3) Negotiating and Contract Execution	a.	
	b.	
(4) Hiring/firing of management personnel	a.	
	b.	
(5) Field/Production Operations Supervisor	a.	
	b.	
(6) Office management	a.	
	b.	
(7) Marketing/Sales	a.	
	b.	

(8) Purchasing of major equipment	a.	
	b.	
(9) Authorized to Sign Company Checks (for any purpose)	a.	
	b.	
(10) Authorized to make Financial Transactions	a.	
	b.	

C. Indicate your firm's inventory in the following categories (*attach additional sheets if needed*):

(1) **Equipment**

Type of Equipment	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

(2) **Vehicles**

Type of Vehicle	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

(3) **Office Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

(4) **Storage Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

D. Does your firm rely on any other firm for management functions or employee payroll? Yes No

If Yes, explain:

E. Financial Information

(1) **Banking Information:**
 (a) Name of bank: _____ (b) Phone No: () _____
 (c) Address of bank: _____ City: _____ State: _____ Zip: _____

(2) **Bonding Information:** If you have bonding capacity, identify: (a) Binder No: _____
 (b) Name of agent/broker _____ (c) Phone No: () _____
 (d) Address of agent/broker: _____ City: _____ State: _____ Zip: _____
 (e) Bonding limit: Aggregate limit \$ _____ Project limit \$ _____

F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner:

Name of Source	Address of Source	Name of Person Securing the Loan	Original Amount	Current Balance	Purpose of Loan
1.					
2.					
3.					

G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):

Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.					
2.					
3.					

H. List current licenses/permits held by any owner and/or employee of your firm (e.g. contractor, engineer, architect, etc.)(attach additional sheets if needed):

Name of License/Permit Holder	Type of License/Permit	Expiration Date	License Number and State
1.			
2.			
3.			

I. List the three largest contracts completed by your firm in the past three years, if any:

Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract
1.			
2.			
3.			

J. List the three largest active jobs on which your firm is currently working:

Name of Prime Contractor and Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					

SCDOT SBE UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST

In order to complete your application for SCDOT SBE certification, you must attach copies of all of the following documents as they apply to you and your firm.

All Applicants

- Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- Personal Financial Statement (form available with this application)
- Personal tax returns for the past three years, if applicable, for each owner claiming disadvantaged status
- Your firm's tax returns (gross receipts) and all related schedules for the past five years
- Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- Your firm's signed loan agreements, security agreements, and bonding forms
- Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- List of equipment leased and signed lease agreements
- List of construction equipment and/or vehicles owned and titles/proof of ownership
- Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- Year-end balance sheets and income statements for the past five years (*or life of firm, if less than five years*); a new business must provide a current balance sheet
- All relevant licenses, license renewal forms, permits, and haul authority forms
- DBE, SBE and SBA 8(a) or SDB certifications, denials, and/or decertification, if applicable
- Bank authorization and signatory cards
- Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- Trust agreements held by any owner claiming disadvantaged status, if any

Partnership or Joint Venture

- Original and any amended Partnership or Joint Venture Agreements

Corporation or LLC

- Official Articles of Incorporation (*signed by the state official*)
- Both sides of all corporate stock certificates and your firm's stock transfer ledger
- Shareholders' Agreement
- Minutes of all stockholders and board of directors meetings
- Corporate by-laws and any amendments
- Corporate bank resolution and bank signature cards
- Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

Trucking Company

- Documented proof of ownership of the company
- Insurance agreements for each truck owned or operated by your firm
- Title(s) and registration certificate(s) for each truck owned or operated by your firm
- List of U.S. DOT numbers for each truck owned or operated by your firm

Regular Dealer

- Proof of warehouse ownership or lease
- List of product lines carried
- List of distribution equipment owned and/or leased

NOTE: The specific state UCP to which you are applying may have additional required documents that you must also supply with your application. Contact the appropriate certifying agency to which you are applying to find out if more is required.

Instructions to complete Personal Financial Statement:

1. Fill out all line items to the best of your ability. Be sure to include the DATE in the upper right corner of the First page.
2. Include all of your and, if applicable, your spouse's assets and liabilities.
3. Assets that must be included are real property (includes rental or vacation homes), personal property wherever located (includes household goods, collectibles, clothing and jewelry), other businesses, vehicles, boats, trailers, cash, bank accounts, stocks, bonds, retirement accounts, insurance policies and any other assets where you have an ownership interest.
4. Complete Section 4 for all of your real estate. Be sure to include and identify which is your primary residence.
5. For married individuals, list both names and all property, including both community and separate property. Complete Section 5 to identify separate property for each spouse.
6. Describe other assets, other property, and other liabilities in detail. Include your equity in your business also, under Other Assets, and then itemize all Other Assets in Section 5.
7. Market values for items such as real estate, other assets and other property should be as accurate as possible to their value as of the above date.
8. If necessary, use additional sheet(s) of paper to report all information and details.
9. To compute **Net Worth**, first add all liabilities and put that figure in the Total Liabilities line, then subtract Total Liabilities from Total Assets to get your **Net Worth**.
10. To determine economic disadvantage eligibility, your **Net Worth** amount will be adjusted by the following to obtain an Adjusted Net Worth figure (see worksheet below).

- Exclusion of an individual's ownership interest in the applicant firm;
- Exclusion of an individual's equity in his or her primary residence;
- Deduction of tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.

An individual's personal net worth includes only his or her own share of assets held jointly or as community property with the individual's spouse. If your Adjusted Net Worth exceeds the \$1.32 million cap and you, individually, or you and other individuals are the majority owners of an applicant firm, the firm is not eligible for DBE certification. If the Adjusted Net Worth of the majority owner(s) exceeds the \$1.32 million cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise the firm no longer qualifies.

Adjusted Net Worth Worksheet:

Net Worth (from page 2).....	\$0
Less: ① ownership interest in applicant firm.....	()
② equity in primary residence.....	()
③ tax and interest penalties on retirement accounts	()
Adjusted Net Worth Total.....	\$0.00

11. Be sure to sign, and date at the end of the statement. If you have any questions or would like assistance in completing this form, please contact one of the certifying agencies on the enclosed Roster.

PERSONAL FINANCIAL STATEMENT

SOUTH CAROLINA UNIFIED CERTIFICATION PROGRAM (SCUCP) As of _____, _____

Complete this form for each owner applying for SBE qualification (i.e., for each owner claiming to be socially and economically disadvantaged). For a firm with more than one owner relied upon for SCDOT SBE certification, please make additional copies as necessary. The SCUCP reserves the right to request additional information as necessary and may conduct an on-site visit to verify the information contained in this Statement. (See instructions attached.)

Name	Are these figures for a married couple? Yes <input type="checkbox"/> No <input type="checkbox"/>
Residence Address	Business Phone
City, State, & Zip Code	
Business Name of Applicant	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks	\$ _____	Accounts Payable	\$ _____
Savings Accounts	\$ _____	Notes Payable to Banks and Others	\$ _____
IRA or Other Retirement Account	\$ _____	(Describe in Section 2)	
Accounts & Notes Receivable	\$ _____	Installment Account (Auto)	\$ _____
Life Insurance-Cash Surrender Value Only	\$ _____	Installment Account (Other)	\$ _____
(Complete Section 8)		Loan on Life Insurance	\$ _____
Stocks and Bonds	\$ _____	Mortgages on Real Estate	\$ _____
(Describe in Section 3)		(Describe in Section 4)	
Real Estate	\$ _____	Unpaid Taxes	\$ _____
(Describe in Section 4)		(Describe in Section 6)	
Automobile-Present Value	\$ _____	Other Liabilities	\$ _____
Other Personal Property	\$ _____	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities	\$ _____
Other Assets	\$ _____	Total	\$ 0
(Describe in Section 5)		Net Worth	\$ 0
Total	\$ 0		

Section 1. Source of Income	Contingent Liabilities
Salary	\$ _____
Net Investment Income	\$ _____
Real Estate Income	\$ _____
Other Income (Describe below)*	\$ _____
	As Endorser or Co-Maker
	\$ _____
	Legal Claims & Judgments
	\$ _____
	Provision for Federal Income Tax
	\$ _____
	Other Special Debt
	\$ _____

Description of Other Income in Section 1.

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Note holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Description of Other Income in Section 1.					
*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.					
Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)					

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned.				(List each parcel separately, including your primary residence. Identify your primary residence. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)		
	Property A	Property B	Property C			
Type of Property						
Address						
Date Purchased						
Original Cost						
Present Market Value						
Name & Address of Mortgage Holder						
Mortgage Account Number						
Mortgage Balance						
Amount of Payment per Month/Year						
Status of Mortgage						

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency. For married applicants only, describe all separate property held by you or your spouse, their values and why they are separate. Use additional paper as needed.)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize member agencies of the South Carolina Unified Certification Program (SCUCP) to make inquiries as necessary to verify the accuracy of the statements made and to determine my financial status. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of demonstrating eligibility to participate in the U.S. Department of Transportation Small Business Enterprise (SBE) program. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature:

Date:

Social Security Number:

Signature:

Date:

Social Security Number:

PLEASE NOTE: This form was adapted from SBA Form 413 (3-00) [OMB APPROVAL NO. 3245-0188, EXPIRATION DATE: 11/30/2004] pursuant to 49 Code of Federal Regulations Part 26, as amended. In accordance with SBA Form 413 the estimated average burden hours for the completion of this form is 1.5 hours per response.

AFFIDAVIT OF CERTIFICATION

This form must be signed and notarized for each owner upon which economically disadvantaged status is relied.

A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS 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 LAW.

I _____ (full name printed), swear or affirm under penalty of law that I am _____ (title) of applicant firm _____ (firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certification Program (UCP) of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am an economically disadvantaged individual who is an owner of the above-referenced firm seeking certification as a Small Business Enterprise (SBE).

I further certify that my personal net worth does not exceed \$1.32 million and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not economically disadvantaged.

I declare under penalty of perjury that the information provided in this application and supporting documents is true and correct.

Executed on _____ (Date)

Signature _____
(SBE Applicant)

NOTARY CERTIFICATE

SOUTH CAROLINA UNIFIED CERTIFICATION PROGRAM (SCUCP)

NAICS Category Codes

The South Carolina Unified Certification Program adopted the 2002 North American Industry Classification System (NAICS), an updated federal classification system on March 26, 2012. Please indicate below areas of expertise that you prefer to perform in order of importance. Enclosed is a **partial list** of NAICS codes for your convenience.

To help you locate appropriate NAICS codes and determine if your firm meets U.S. Small Business Administration (SBA) and U.S. DOT size standards, a search tool is available on the SBA web site at: <http://www.sba.gov/size/indexableofsize.html>. SCDOT SBE applicants are first subject to the applicable small business size standards of the Small Business Administration (SBA). Second, the average annual gross receipts for the firm (including its affiliates) over the previous five fiscal years must not exceed the SCDOT UCP cap of \$7.5 million. Please note that size standards are subject to change at any time by the SBA. If you do not have Internet access or need assistance, please call 803-737-1372.

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<u>NAICS Code</u>	<u>Description of Work/Service</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SOUTH CAROLINA UNIFIED CERTIFICATION PROGRAM

List of NAICS Codes (partial)

110000	Agriculture, Forestry, Fishing and Hunting
111000	Crop Production
112000	Animal Production
113000	Forestry and Logging
114000	Fishing, Hunting and Trapping
115000	Support Activities for Agriculture and Forestry

210000	Mining
211000	Oil and Gas Extraction
212000	Mining (except Oil and Gas)
213000	Support Activities for Mining

220000	Utilities
221110	Hydroelectric, Fossil Fuel, Nuclear and Other Electric Power Generation
221120	Electric Power Transmission, Control and Distribution
221310	Water Supply and Irrigation Systems

230000	Construction*
236000	<i>Construction of Buildings</i>
236115	New Single-Family Housing Construction (except Operative Builders)
236116	New Multifamily Housing Construction (except Operative Builders)
236117	New Housing Operative Builders
236118	Residential Remodelers
236210	Industrial Building Construction
236220	Commercial and Institutional Building Construction
237000	<i>Heavy and Civil Engineering Construction</i>
237110	Water and Sewer Line and Related Structures Construction
237120	Oil and Gas Pipeline and Related Structures Construction
237130	Power and Communication Line and Related Structures Construction
237210	Land Subdivision
237310	Highway, Street, and Bridge Construction
237990	Other Heavy and Civil Engineering Construction
237990	Dredging and Surface Cleanup Activities
238000	<i>Specialty Trade Contractors</i>
238110	Poured Concrete Foundation and Structure Contractors
238120	Structural Steel and Precast Concrete Contractors
238130	Framing Contractors
238140	Masonry Contractors
238150	Glass and Glazing Contractors
238160	Roofing Contractors
238170	Siding Contractors
238190	Other Foundation, Structure, and Building Exterior Contractors
238210	Electrical Contractors
238220	Plumbing, Heating, and Air-Conditioning Contractors
238290	Other Building Equipment Contractors
238310	Drywall and Insulation Contractors
238320	Painting and Wall Covering Contractors
238330	Flooring Contractors
238340	Tile and Terrazzo Contractors
238350	Finish Carpentry Contractors
238390	Other Building Finishing Contractors
238910	Site Preparation Contractors
238990	All Other Specialty Trade Contractors

310000	Manufacturing
339999	
311000	<i>Food Manufacturing</i>
312000	<i>Beverage and Tobacco Product Manufacturing</i>
313000	<i>Textile Mills</i>
314000	<i>Textile Product Mills</i>
315000	<i>Apparel Manufacturing</i>
315211	Men's and Boys' Cut and Sew Apparel Contractors
315212	Women's, Girls', and Infants' Cut and Sew Apparel Contractors
315220	Men's and Boys' Cut and Sew Apparel Manufacturing
315230	Women's and Girls' Cut and Sew Apparel Manufacturing
315299	All Other Cut and Sew Apparel Manufacturing
315999	Other Apparel Accessories and Other Apparel Manufacturing
316000	<i>Leather and Allied Product Manufacturing</i>
316211	Rubber and Plastics Footwear Manufacturing
316213	Men's Footwear (except Athletic) Manufacturing
316214	Women's Footwear (except Athletic) Manufacturing
316219	Other Footwear Manufacturing
321000	<i>Wood Product Manufacturing</i>
322000	<i>Paper Manufacturing</i>
323000	<i>Printing and Related Support Activities</i>
323110	Commercial Lithographic Printing
323111	Commercial Gravure Printing
323112	Commercial Flexographic Printing
323113	Commercial Screen Printing
323114	Quick Printing
323115	Digital Printing
323116	Manifold Business Forms Printing
323117	Books Printing
323118	Blankbook, Loose-leaf Binder and Device Manufacturing
323119	Other Commercial Printing
323121	Trade binding and Related Work
323122	Prepress Services
324000	<i>Petroleum and Coal Products Manufacturing</i>
324121	Asphalt Paving Mixture and Block Manufacturing
324122	Asphalt Shingle and Coating Materials Manufacturing
325000	<i>Chemical Manufacturing</i>
326000	<i>Plastics and Rubber Products Manufacturing</i>
326211	Tire Manufacturing (except Retreading)
326212	Tire Retreading
326220	Rubber and Plastics Hoses and Belting Manufacturing
326291	Rubber Product Manufacturing for Mechanical Use
326299	All Other Rubber Product Manufacturing
327000	<i>Nonmetallic Mineral Product Manufacturing</i>
331000	<i>Primary Metal Manufacturing</i>
332000	<i>Fabricated Metal Product Manufacturing</i>
332116	Metal Stamping
332322	Sheet Metal Work Manufacturing
332323	Ornamental and Architectural Metal Work Manufacturing
332710	Machine Shops
332721	Precision Turned Product Manufacturing
332996	Fabricated Pipe and Pipe Fitting Manufacturing
333000	<i>Machinery Manufacturing</i>
333120	Construction Machinery Manufacturing
333311	Automatic Vending Machine Manufacturing
333313	Office Machinery Manufacturing

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.)

South Carolina Unified Certification Program
List of NAICS Codes (partial)

333414	Heating Equipment (except Warm Air Furnaces) Manufacturing	336411	Aircraft Manufacturing
333415	Air-Conditioning and Warm Air Heating Equipment and Commercial and Industrial Refrigeration Equipment Manufacturing	336510	Railroad Rolling Stock Manufacturing
333514	Special Die and Tool, Die Set, Jig and Fixture Manufacturing	336611	Ship Building and Repairing
333613	Mechanical Power Transmission Equipment Manufacturing	336991	Motorcycle, Bicycle and Parts Manufacturing
333618	Other Engine Equipment Manufacturing	336999	All Other Transportation Equipment Manufacturing
333911	Pump and Pumping Equipment Manufacturing	337000	<i>Furniture and Related Product Manufacturing</i>
333921	Elevator and Moving Stairway Manufacturing	337127	Institutional Furniture Manufacturing
333922	Conveyor and Conveying Equipment Manufacturing	337211	Wood Office Furniture Manufacturing
333923	Overhead Traveling Crane, Hoist and Monorail System Manufacturing	337214	Office Furniture (Except Wood) Manufacturing
333924	Industrial Truck, Tractor, Trailer and Stacker Machinery Manufacturing	337215	Showcase, Partition, Shelving, and Locker Manufacturing
334000	<i>Computer and Electronic Product Manufacturing</i>	337920	Blind and Shade Manufacturing
334111	Electronic Computer Manufacturing	339000	<i>Miscellaneous Manufacturing</i>
334112	Computer Storage Device Manufacturing	339111	Laboratory Apparatus and Furniture Manufacturing
334113	Computer Terminal Manufacturing	339950	Sign Manufacturing
334119	Other Computer Peripheral Equipment Manufacturing	339991	Gasket, Packing, and Sealing Device Manufacturing
334210	Telephone Apparatus Manufacturing		
334220	Radiocand Television Broadcasting and Wireless Communications Equipment Manufacturing	420000	Wholesale Trade
334290	Other Communications Equipment Manufacturing	423000	<i>Merchant Wholesalers, Durable Goods</i>
334310	Audio and Video Equipment Manufacturing	423110	Automobile and Other Motor Vehicle Merchant Wholesalers
334417	Electronic Connector Manufacturing	423120	Motor Vehicle Supplies and New Parts Merchant Wholesalers
334418	Printed Circuit Assembly (Electronic Assembly) Mfg	423130	Tire and Tube Merchant Wholesalers
334419	Other Electronic Component Manufacturing	423140	Motor Vehicle Parts (Used) Merchant Wholesalers
334511	Search, Detection, Navigation, Guidance, Aeronautical, and Nautical System and Instrument Manufacturing	423210	Furniture Merchant Wholesalers
334512	Automatic Environmental Control Manufacturing for Residential, Commercial and Appliance Use	423310	Lumber, Plywood, Millwork, and Wood Panel Merchant Wholesalers
334513	Instruments and Related Products Manufacturing for Measuring, Displaying, and Controlling Industrial Process Variables	423320	Brick, Stone, and Related Construction Material Merchant Wholesalers
334514	Totalizing Fluid Meter and Counting Device Manufacturing	423330	Roofing, Siding, and Insulation Material Merchant Wholesalers
334518	Watch, Clock, and Part Manufacturing	423390	Wholesalers
334519	Other Measuring and Controlling Device Manufacturing	423410	Other Construction Material Merchant Wholesalers
334611	Software Reproducing	423420	Photographic Equipment and Supplies Merchant Wholesalers
334612	Prerecorded Compact Disc (except Software), Tape, and Record Reproducing	423430	Office Equipment Merchant Wholesalers
334613	Magnetic and Optical Recording Media Manufacturing	423440	Computer and Computer Peripheral Equipment and Software Merchant Wholesalers
335000	<i>Electrical Equipment, Appliance and Component Manufacturing</i>	423450	Other Commercial Equipment Merchant Wholesalers
336000	<i>Transportation Equipment Manufacturing</i>	423455	Medical, Dental, and Hospital Equipment and Supplies Merchant Wholesalers
336112	Light Truck and Utility Vehicle Manufacturing	423490	Other Professional Equipment and Supplies Merchant Wholesalers
336120	Heavy Duty Truck Manufacturing	423510	Metal Service Centers and Other Metal Merchant Wholesalers
336211	Motor Vehicle Body Manufacturing	423610	Electrical Apparatus and Equipment, Wiring Supplies, and Related Equipment Merchant Wholesalers
336212	Truck Trailer Manufacturing	423620	Electrical and Electronic Appliance, Television, and Radio Set Merchant Wholesalers
336311	Carburetor, Piston, Piston Ring and Valve Manufacturing	423690	Other Electronic Parts and Equipment Merchant Wholesalers
336312	Gasoline Engine and Engine Parts Manufacturing	423710	Hardware Merchant Wholesalers
336321	Vehicular Lighting Equipment Manufacturing	423720	Plumbing and Heating Equipment and Supplies (Hydronics) Merchant Wholesalers
336322	Other Motor Vehicle Electrical and Electronic Equipment Manufacturing	423730	Warm Air Heating and Air-Conditioning Equipment and Supplies Merchant Wholesalers
336330	Motor Vehicle Steering and Suspension Components (except Spring) Manufacturing	423740	Refrigeration Equipment and Supplies Merchant Wholesalers
336340	Motor Vehicle Brake System Manufacturing	423810	Construction and Mining (except Oil Well) Machinery and Equipment Merchant Wholesalers
336350	Motor Vehicle Transmission and Power Train Parts Manufacturing	423820	Farm and Garden Machinery and Equipment Merchant Wholesalers
336360	Motor Vehicle Seating and Interior Trim Manufacturing	423830	Industrial Machinery and Equipment Merchant Wholesalers
336370	Motor Vehicle Metal Stamping	423840	Industrial Supplies Merchant Wholesalers
336391	Motor Vehicle Air-Conditioning Manufacturing	423850	Service Establishment Equipment and Supplies Merchant Wholesalers
336399	All Other Motor Vehicle Parts Manufacturing	423860	Transportation Equipment and Supplies (except Motor Vehicle) Merchant Wholesalers
		423930	Recyclable Material Merchant Wholesalers
		423940	Other Miscellaneous Durable Goods Merchant Wholesalers

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.

South Carolina Unified Certification Program
List of NAICS Codes (partial)

424000	<i>Merchant Wholesalers, Nondurable Goods</i>	446000	<i>Health and Personal Care Stores</i>
424110	Printing and Writing Paper Merchant Wholesalers	447000	<i>Gasoline Stations</i>
424120	Stationary and Office Supplies Merchant Wholesalers	448000	<i>Clothing and Clothing Accessories Stores</i>
424130	Industrial and Personal Service Paper Merchant Wholesalers	448110	Men's Clothing Stores
424210	Drugs and Druggists' Sundries Merchant Wholesalers	448120	Women's Clothing Stores
424310	Piece Goods, Notions, and Other Dry Goods Merchant Wholesalers	448130	Children's and Infants' Clothing Stores
424320	Men's and Boys' Clothing and Furnishings Merchant Wholesalers	448140	Family Clothing Stores
424330	Women's, Children's, and Infants' Clothing and Accessories Merchant Wholesalers	448150	Clothing Accessories Stores
424340	Footwear Merchant Wholesalers	448190	Other Clothing Stores
424410	General Line Grocery Merchant Wholesalers	448210	Shoe Stores
424420	Packaged Frozen Food Merchant Wholesalers	448320	Luggage and Leather Goods Stores
424490	Other Grocery and Related Products Merchant Wholesalers	451000	<i>Sporting Good, Hobby, Book and Music Stores</i>
424610	Plastics Materials and Basic Forms and Shapes Merchant Wholesalers	451211	Book Stores
424690	Other Chemical and Allied Products Merchant Wholesalers	451212	News Dealers and Newsstands
424710	Petroleum Bulk Stations and Terminals	452000	<i>General Merchandise Store</i>
424720	Petroleum and Petroleum Products Merchant Wholesalers (except Bulk Stations and Terminals)	453000	<i>Miscellaneous Store Retailers</i>
424920	Book, Periodical, and Newspaper Merchant Wholesalers	453110	Florists
424930	Flower, Nursery Stock, and Florists' Supplies Merchant Wholesalers	453210	Office Supplies and Stationery Stores
424940	Tobacco and Tobacco Product Merchant Wholesalers	453220	Gift, Novelty and Souvenir Stores
424950	Paint, Varnish, and Supplies Merchant Wholesalers	453310	Used Merchandise Stores
424990	Other Miscellaneous Nondurable Goods Merchant Wholesalers	454000	<i>Non-store Retailers</i>
425000	Wholesale Electronic Markets and Agents and Brokers	454111	Electronic Shopping
425110	Business to Business Electronic Markets	454112	Electronic Auctions
425120	Wholesale Trade Agents and Brokers	454113	Mail-Order Houses
440000	<i>Retail Trade</i>	454210	Vending Machine Operators
-		454311	Heating Oil Dealers
459999		454312	Liquefied Petroleum Gas (Bottled Gas) Dealers
		454319	Other Fuel Dealers
		454390	Other Direct Selling Establishments
		480000	<i>Transportation</i>
		-	
		499999	
441000	<i>Motor Vehicle and Parts Dealers</i>	481000	<i>Air Transportation</i>
441110	New Car Dealers	481111	Scheduled Passenger Air Transportation
441120	Used Car Dealers	481112	Scheduled Freight Air Transportation
441221	Motorcycle Dealers	481211	Nonscheduled Chartered Passenger Air Transportation
441222	Boat Dealers	481212	Nonscheduled Chartered Freight Air Transportation
441229	All Other Motor Vehicle Dealers	481219	Other Nonscheduled Air Transportation
441229	Aircraft Dealers, Retail	482000	<i>Rail Transportation</i>
441310	Automotive Parts and Accessories Stores	483000	<i>Water Transportation</i>
441320	Tire Dealers	484000	<i>Truck Transportation</i>
442000	<i>Furniture and Home Furnishings Stores</i>	484110	General Freight Trucking, Local
442110	Furniture Stores	484121	General Freight Trucking, Long-Distance, Truckload
442210	Floor Covering Stores	484122	General Freight Trucking, Long-Distance, Less Than Truckload
442291	Window Treatment Stores	484210	Used Household and Office Goods Moving
442299	All Other Home Furnishings Stores	484220	Specialized Freight (except Used Goods) Trucking, Local
443000	<i>Electronics and Appliance Stores</i>	484220	Specialized Freight (except Used Goods) Trucking, Long-Distance
443111	Household Appliance Stores	484230	
443112	Radio, Television and Other Electronics Stores	485000	<i>Transit and Ground Passenger Transportation</i>
443120	Computer and Software Stores	485111	Mixed Mode Transit Systems
443130	Camera and Photographic Supplies Stores	485112	Commuter Rail Systems
444000	<i>Building Material and Garden Equipment and Supplies Dirs</i>	485113	Bus and Motor Vehicle Transit Systems
444110	Home Centers	485119	Other Urban Transit Systems
444120	Paint and Wallpaper Stores	485210	Interurban and Rural Bus Transportation
444130	Hardware Stores	485310	Taxi Service
444190	Other Building Material Dealers	485320	Limousine Service
444210	Outdoor Power Equipment Stores	485410	School and Employee Bus Transportation
444220	Nursery and Garden Centers	485510	Charter Bus Industry
445000	<i>Food and Beverage Stores</i>		

*Note: evidence of State or other licensing is required in order to be classified in this industry, if applicable.

South Carolina Unified Certification Program
List of NAICS Codes (partial)

485991	Special Needs Transportation	518112	Web Search Portals
485999	All Other Transit and Ground Passenger Transportation	518210	Data Processing, Hosting, and Related Services
486000	<i>Pipeline Transportation</i>	519000	<i>Other Information Services</i>
487000	<i>Scenic and Sightseeing Transportation</i>	519110	News Syndicates
488000	<i>Support Activities for Transportation</i>	519120	Libraries and Archives
488111	Air Traffic Control	519190	All Other Information Services
488119	Other Airport Operations	520000	<i>Finance and Insurance*</i>
488190	Other Support Activities for Air Transportation	522000	<i>Credit Intermediation and Related Activities</i>
488210	Support Activities for Rail Transportation	522220	Sales Financing
488310	Port and Harbor Operations	522291	Consumer Lending
488320	Marine Cargo Handling	522292	Real Estate Credit
488390	Other Support Activities for Water Transportation	522298	All Other Non-Depository Credit Intermediation
488410	Motor Vehicle Towing	522310	Mortgage and Nonmortgage Loan Brokers
488490	Other Support Activities for Road Transportation		Financial Transactions Processing, Reserve, and Clearing
488510	Freight Transportation Arrangement	522320	House Activities
488991	Packing and Crating	522390	Other Activities Related to Credit Intermediation
488999	All Other Support Activities for Transportation	523000	<i>Financial Investments and Related Activities</i>
491000	<i>Postal Service</i>	523110	Investment Banking and Securities Dealing
492000	<i>Couriers and Messengers</i>	523120	Securities Brokerage
492110	Couriers	523130	Commodity Contracts Dealing
492210	Local Messengers and Local Delivery	523140	Commodity Contracts Brokerage
493000	<i>Warehousing and Storage</i>	523910	Miscellaneous Intermediation
493110	General Warehousing and Storage	523920	Portfolio Management
493120	Refrigerated Warehousing and Storage	523930	Investment Advice
493190	Other Warehousing and Storage	523991	Trust, Fiduciary and Custody Activities
510000	<i>Information</i>	523999	Miscellaneous Financial Investment Activities
511000	<i>Publishing Industries (except Internet)</i>	524000	<i>Insurance Carriers and Related Activities</i>
511110	Newspaper Publishers	524113	Direct Life Insurance Carriers
511120	Periodical Publishers	524114	Direct Health and Medical Insurance Carriers
511130	Book Publishers	524126	Direct Property and Casualty Insurance Carriers
511140	Directory and Mailing List Publishers	524127	Direct Title Insurance Carriers
511199	All Other Publishers		Other Direct Insurance (except Life, Health and Medical)
511210	Software Publishers	524128	Carriers
512110	Motion Picture and Video Production	524130	Reinsurance Carriers
512191	Teleproduction and Other Postproduction Services	524210	Insurance Agencies and Brokerages
512199	Other Motion Picture and Video Industries	524291	Claims Adjusting
512210	Record Production	524292	Third Party Administration of Insurance and Pension Funds
512220	Integrated Record Production/Distribution	524298	All Other Insurance Related Activities
512240	Sound Recording Studios	525000	<i>Funds, Trusts and Other Financial Vehicles</i>
512290	Other Sound Recording Industries	525110	Pension Funds
515000	<i>Broadcasting (except Internet)</i>	525120	Health and Welfare Funds
515111	Radio Networks*	525190	Other Insurance Funds
515112	Radio Stations*	525910	Open-End Investment Funds
515120	Television Broadcasting*	525920	Trusts, Estates, and Agency Accounts
515210	Cable and Other Subscription Programming	525930	Real Estate Investment Trusts
516000	<i>Internet Publishing and Broadcasting</i>	525990	Other Financial Vehicles
516110	Internet Publishing and Broadcasting	530000	<i>Real Estate and Rental and Leasing</i>
517000	<i>Telecommunications</i>	531000	<i>Real Estate</i>
517110	Wired Telecommunications Carriers		Lessors of Nonresidential Buildings (except Mini-
517211	Paging	531120	warehouses)
517212	Cellular and Other Wireless Telecommunications	531130	Lessors of Mini-warehouses and Self Storage Units
517310	Telecommunications Resellers	531190	Lessors of Other Real Estate Property
517410	Satellite Telecommunications	531210	Offices of Real Estate Agents and Brokers*
517510	Cable and Other Program Distribution	531312	Nonresidential Property Managers
517910	Other Telecommunications	531320	Offices of Real Estate Appraisers*
	<i>Internet Service Providers, Web Search Portals, and Data</i>	531390	Other Activities Related to Real Estate
518000	<i>Processing Services</i>	532000	<i>Rental and Leasing Services</i>
518111	Internet Service Providers	532111	Passenger Car Rental

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South Carolina Unified Certification Program
List of NAICS Codes (partial)

532112	Passenger Car Leasing	541870	Advertising Material Distribution Services
532120	Truck, Utility Trailer, and RV (Recreational Vehicle) Rental and Leasing	541890	Other Services Related to Advertising
532210	Consumer Electronics and Appliances Rental	541910	Marketing Research and Public Opinion Polling
532299	All Other Consumer Goods Rental	541922	Commercial Photography
532310	General Rental Centers	541930	Translation and Interpretation Services
	Commercial Air, Rail, and Water Transportation Equipment Rental and Leasing	541990	All Other Professional, Scientific and Technical Services
532411	Construction, Mining and Forestry Machinery and Equipment Rental and Leasing	<hr/> 550000 Management of Companies and Enterprises <hr/>	
532412	Office Machinery and Equipment Rental and Leasing	551111	Offices of Bank Holding Companies
532420	Other Commercial and Industrial Machinery and Equipment Rental and Leasing	551112	Offices of Other Holding Companies
532490	Lessors of Nonfinancial Intangible Assets (except Copyrighted Works)	<hr/> 560000 Administrative and Support Services <hr/>	
533110		<i>Administrative and Support Services</i>	
<hr/> 540000 Professional, Scientific and Technical Services <hr/>		561000	Office Administrative Services
541110	Offices of Lawyers*	561110	Facilities Support Services
541191	Title Abstract and Settlement Offices	561210	Base Maintenance
541199	All Other Legal Services	561210	Employment Placement Agencies
541211	Offices of Certified Public Accountants*	561310	Temporary Help Services
541213	Tax Preparation Services*	561320	Employee Leasing Services
541214	Payroll Services	561330	Document Preparation Services
541219	Other Accounting Services	561410	Telephone Answering Services
541310	Architectural Services*	561421	Telemarketing Bureaus
541320	Landscape Architectural Services*	561422	Private Mail Centers
541330	Engineering Services*	561431	Other Business Service Centers (including Copy Shops)
541340	Drafting Services	561439	Collection Agencies
541340	Map Drafting	561440	Credit Bureaus
541350	Building Inspection Services	561450	Repossession Services
541360	Geophysical Surveying and Mapping Services*	561491	Court Reporting and Stenotype Services
541370	Surveying and Mapping (except Geophysical) Services*	561492	All Other Business Support Services
541380	Testing Laboratories	561499	Travel Agencies
541410	Interior Design Services	561510	Tour Operators
541420	Industrial Design Services	561520	All Other Travel Arrangement and Reservation Services
541430	Graphic Design Services	561611	Investigation Services
541490	Other Specialized Design Services	561612	Security Guards and Patrol Services*
541511	Custom Computer Programming Services	561613	Armored Car Services
541512	Computer Systems Design Services	561621	Security Systems Services (except Locksmiths)
541513	Computer Facilities Management Services	561622	Locksmiths
541519	Other Computer Related Services	561710	Exterminating and Pest Control Services*
	Administrative Management and General Management Consulting Services	561720	Janitorial Services
541611	Human Resources and Executive Search Consulting Services	561730	Landscaping Services*
541612	Marketing Consulting Services	561740	Carpet and Upholstery Cleaning Services
541613	Process, Physical Distribution and Logistics Consulting Services	561790	Other Services to Buildings and Dwellings
541614	Other Management Consulting Services	561910	Packaging and Labeling Services
541620	Environmental Consulting Services	561920	Convention and Trade Show Organizers
541690	Other Scientific and Technical Consulting Services	561990	All Other Support Services
	Research and Development in the Physical, Engineering, and Life Sciences	<hr/> 562000 Waste Management and Remediation Services <hr/>	
541710	Research and Development in the Social Sciences and Humanities	562111	Solid Waste Collection
541720	Advertising Agencies	562112	Hazardous Waste Collection*
541810	Public Relations Agencies	562119	Other Waste Collection
541820	Media Buying Agencies	562211	Hazardous Waste Treatment and Disposal*
541830	Media Representatives	562219	Other Nonhazardous Waste Treatment and Disposal
541840	Display Advertising	562910	Environmental Remediation Services
541850	Direct Mail Advertising	562920	Materials Recovery Facilities
		562998	All Other Miscellaneous Waste Management Services
		<hr/> 610000 Educational Services <hr/>	
		611410	Business and Secretarial Schools
		611420	Computer Training
		611430	Professional and Management Development Training
		611512	Flight Training

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South Carolina Unified Certification Program
List of NAICS Codes (partial)

611513	Apprenticeship Training
611519	Other Technical and Trade Schools
611630	Language Schools
611691	Exam Preparation and Tutoring
611692	Automobile Driving Schools
611699	All Other Miscellaneous Schools and Instruction
611710	Educational Support Services

620000 Health Care and Social Assistance*

<i>Ambulatory Health Care Services</i>	
621000	
621110	Offices of Physicians
621210	Offices of Dentists
621310	Offices of Chiropractors
621320	Offices of Optometrists
621330	Offices of Mental Health Practitioners (except Physicians)
621340	Offices of Physical, Occupational and Speech Therapists and Audiologists
621391	Offices of Podiatrists
621399	Offices of All Other Miscellaneous Health Practitioners
621410	Family Planning Centers
621420	Outpatient Mental Health and Substance Abuse Centers
621492	Kidney Dialysis Centers
621493	Freestanding Ambulatory Surgical and Emergency Centers
621498	All Other Outpatient Care Centers
621511	Medical Laboratories
621512	Diagnostic Imaging Centers
621610	Home Health Care Services
621910	Ambulance Services
621999	All Other Miscellaneous Ambulatory Health Care Services--
622000	<i>Hospitals</i>
623000	<i>Nursing and Residential Care Facilities</i>
624000	<i>Social Assistance</i>
624110	Child and Youth Services
624120	Services for the Elderly and Persons with Disabilities
624190	Other Individual and Family Services
624210	Community Food Services
624221	Temporary Shelters
624229	Other Community Housing Services
624230	Emergency and Other Relief Services
624310	Vocational Rehabilitation Services
624410	Child Day Care Services

710000 Arts, Entertainment and Recreation

711000	Performing Arts, Spectator Sports and Related Industries
712000	Museums, Historical Sites and Similar Institutions
713000	Amusement, Gambling and Recreation Industries

720000 Accommodation and Food Services

<i>Accommodation</i>	
721000	
<i>Food Services and Drinking Places</i>	
722000	
722110	Full-Service Restaurants
722211	Limited-Service Restaurants
722212	Cafeterias
722213	Snack and Nonalcoholic Beverage Bars
722310	Food Service Contractors
722320	Caterers
722330	Mobile Food Services
722410	Drinking Places (Alcoholic Beverages)

10000 Other Services

<i>Repair and Maintenance</i>	
811000	
811111	General Automotive Repair
811112	Automotive Exhaust System Repair
811113	Automotive Transmission Repair
811118	Other Automotive Mechanical and Electrical Repair and Maintenance
811121	Automotive Body, Paint and Interior Repair and Maintenance
811122	Automotive Glass Replacement Shops
811191	Automotive Oil Change and Lubrication Shops
811192	Car Washes
811198	All Other Automotive Repair and Maintenance
811211	Consumer Electronics Repair and Maintenance
811212	Computer and Office Machine Repair and Maintenance
811213	Communication Equipment Repair and Maintenance
811219	Other Electronic and Precision Equipment Repair and Maintenance
811310	Commercial and Industrial Machinery and Equipment (except Automotive and Electronic) Repair and Maintenance
811411	Home and Garden Equipment Repair and Maintenance
811412	Appliance Repair and Maintenance
811420	Reupholstery and Furniture Repair
811430	Footwear and Leather Goods Repair
812000	<i>Personal and Laundry Services</i>
812320	Dry-cleaning and Laundry Services (except Coin-Operated)
812331	Linen Supply
812332	Industrial Launderers
812921	Photo Finishing Laboratories (except One-Hour)
812922	One-Hour Photo Finishing
812930	Parking Lots and Garages
813000	<i>Religious, Grantmaking, Civic, Professional and Similar Organizations</i>

The following internal codes are not NAICS codes, and are to be used only by Airport Concessionaires

999xxx Airport Concessions

999000	Airport Concessionaire - Food and Beverage
999001	Airport Concessionaire - Book Stores
999002	Airport Concessionaire - Auto Rental
999003	Airport Concessionaire - Banks
999004	Airport Concessionaire - Hotels and Motels
999005	Airport Concessionaire - Insurance Machines and Counters
999006	Airport Concessionaire - Gift, Novelty, and Souvenir Shop
999007	Airport Concessionaire - Newsstands
999008	Airport Concessionaire - Shoe Shine Stands
999009	Airport Concessionaire - Barber Shops
999010	Airport Concessionaire - Automobile Parking
999011	Airport Concessionaire - Jewelry Store
999012	Airport Concessionaire - Advertising
999013	Airport Concessionaire - Luggage Cart
999014	Airport Concessionaire - Nail Salons

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