



APPLICATION FOR CERTIFICATION AS AN INDIAN PREFERENCE FIRM

1. FIRM IDENTIFICATION

Name of firm (exactly as you want it to appear on all documents)

Address: _____

Telephone: _____

Date of Submission: _____

Single Business: _____ **Joint Venture:** _____

Applying for: _____ **100% Indian Owned Certification**
_____ **51% Indian Owned Certification**
_____ **50% Indian Owned Certification**

Contact Person: _____

Address: _____

Telephone Business: _____ Home: _____

Type of Business (list all of business in which firm intends to engage).

Federal Identification Number: _____

Number of Employees: _____ Number of Indian Employees: _____

Year Business was Established: _____

2. OWNERSHIP

a. Type of Ownership (check one)

Sole Proprietorship _____
Partnership _____ (attach copy of any partnership agreement with amendments since creation of partnership).

Corporation _____ (attach copy of the certificate of incorporation, article of incorporation, and by-laws, including all amendments since creation of the corporation).

b. Percent of Indian Ownership: _____

c. For each Indian owner to provide name, address, tribal affiliation, enrollment #, percent of ownership, amount of investment in the firm, method of investment, (cash, equipment, loan or promissory note indicating who the loan is from, percent of voting control and position in the firm.

d. For each non Indian owner, list name, address, percent of ownership amount of investment in firm, method of investment (cash, equipment, loan or promissory note indication who the loan or note is from, percent of voting control, position in firm, name of all other firms owner holds in other than

publicly-held corporations and similar ownerships solely for investments, or a management position in.

3. MANAGEMENT

A. For each owner of more than 50% interest, all senior management personnel and members of the Board of Directors provide the following:

- 1. Name, address and social security number. If Indian, tribe and enrollment number**
- 2. Present position (description of all duties).**
- 3. Previous business experience.**
- 4. Previous work experience in areas in which firm intends to engage.**
- 5. Other previous work experience.**
- 6. Education and training.**
- 7. Other jobs presently held.**

B. Control of Company. Identify by name, race, sex and title on company those individuals (owners and non-owners) who are responsible for day-to-day management, including, but, not limited to those with prime responsibility for:

- 1. Financial decisions.**
- 2. Management decisions, such as:**
 - a. Marketing and sales;**
 - b. Hiring and firing;**
 - c. Purchase of major equipment of supplies;**
 - d. Supervision of field personnel.**

4. CAPITAL AND EQUIPMENT

A. Equipment

List all equipment (costing \$300 or more when new)

<u>QUANTITY</u>	<u>DESCRIPTION</u>	<u>PRICE</u>	<u>BOOK VALUE</u>	<u>HOW OBTAINED</u>
------------------------	---------------------------	---------------------	--------------------------	----------------------------

(purch. prov. by owner)

B. Capital

- 1. Attach a current balance sheet.**
- 2. Identify amount and source of original and present capital (e.g., contributed by owner, bank loan, if loan, indicate name(s) of those legally bound to repay if other than corporation).**

C. Additional Submissions

Each applicant must submit with this application the following:

- 1. Lists of officers, principals stockholders, and directors, with post office addresses and number of shares held by each.**
- 2. A sworn statement of the proper officer showing:**
 - a. The total number of shares of the capital stock actually issued and the amount of cash paid into the treasury on each share sold; or, if paid in property, the kind, quantity and value of the same per share.**
 - b. Of the stock sold, how much remains unpaid and subject to assessment.**
 - c. The amount of cash the company has in its treasury and elsewhere.**
 - d. The property exclusive of cash, owned by the company and it's value.**
 - e. The total indebtedness of the company and the nature of its obligations.**

5. CERTIFICATION

I hereby certify that the information provided in this application is true and complete to the best of my knowledge and belief. I further hereby certify that I have read the applicable TERO ordinances, criteria and procedures and do hereby submit to the jurisdiction provided for therein.

Name of Firm: _____

BY: _____
(signature of authorized official)

Name (please type or print): _____

Title (please type or print): _____

Check list for Indian Preference Firms

- _____ 1. Verification of Enrollment of a federally recognize tribe.**
- _____ 2. Copy of company Insurances with owners name(s).**
- _____ 3. Copy of an updated Blackfeet Business License.**
- _____ 4. Proof of ownership (copy of taxes)**
- _____ 5. Copy of any vehicle registration (this includes all equipment listed on page 3 & 4 used for the company).**