



SUBCONTRACTOR/SUPPLIER SIZE SELF-CERTIFICATION

COMPANY (LEGAL) NAME:

ADDRESS OF COMPANY:

NAME & TITLE OF PRIMARY CONTACT:

TELEPHONE NUMBER:

FAX NUMBER:

E-MAIL ADDRESS:

TRADE(S):

NORTH AMERICAN INDUSTRY CLASSIFICATION SYSTEM (NAICS):

D-U-N-S No.:

FEDERAL EMPLOYER IDENTIFICATION No.:

CAGE No.:

BUSINESS SIZE OF COMPANY:

(PLEASE CHECK ONE)

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Large Business

A company whose business is not classified as any other business entity listed below.

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Small Business

A company, including its affiliates, located in the U.S., organized for profit, independently owned and operated, not dominant in field of operations in which it performs work, and qualified as a Small Business under the criteria and size standards in 13 CFR, part 121. If you have difficulty ascertaining your size status, please refer to SBA's website at www.sba.gov/size or contact your local SBA office.

BUSINESS CLASSIFICATION OF COMPANY:

(PLEASE CHECK ALL THAT APPLY)

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Small Disadvantaged Business (to include 8(a) and Alaskan Native Corp. & Indian Tribes)

A Small Business as defined above, owned and controlled by at least 1 socially and economically disadvantaged individual who is in good character, and a citizen of the U.S. **(Self-certifiable)**

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Woman-Owned Small Business

A Small Business as defined above, at least 51% owned by 1 or more women (or in the case of any publicly owned business, at least 51% of the stock is owned by 1 or more women), and whose management and daily business operations are controlled by at least 1 woman. **(Self-certifiable)**

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HUBZone Small Business

A Small Business as defined above, at least 51% owned by U.S. citizen(s), and SBA-certified as a HUBZone (principal office located in an economically-distressed HUBZone area and 35% of employees live in any designated HUBZone).

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Veteran-Owned Small Business

A Small Business as defined above, veteran-owned as defined in 38 USC 101(2), at least 51% owned by 1 or more veterans (or in the case of any publicly owned business, at least 51% of the stock is owned by 1 or more veterans), and whose management and daily business operations are controlled by at least 1 veteran. **(Self-certifiable)**

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Service-Disabled Veteran-Owned Small Business

A Small Business as defined above, veteran-owned, at least 51% owned by 1 or more service-disabled veterans (or in the case of any publicly owned business, at least 51% of the stock is owned by 1 or more service-disabled veterans), and whose management and daily business operations are controlled by at least 1 service-disabled veteran OR in the case of a veteran with permanent and severe disability, the spouse or permanent caregiver of such veteran, and with 0%-100% service-connected disability as defined in 38 USC 101(16) and documented on DD 214 or equivalent. **(Self-certifiable)**

**COMPANY REGISTERED WITH:**

(PLEASE ATTACH ALL RELEVANT CERTIFICATION FORMS)

- ☐ Small Business Administration (SBA) Dynamic Small Business Search (DSBS)
- ☐ System for Award Management (SAM)
- ☐ VDOT / MDOT / DDOT / WMATA / CBE / 8(a) / SWaM / MWAA
(please circle all that apply)
- ☐ Other (please specify): _____
- ☐ Please check this box if you would like to be contacted by our Small Business Compliance Manager for additional assistance in registering for any of the above certifications.

COMPANY SIZE DETERMINATION:

Has company previously been the subject of a formal SBA size determination?

☐ Yes ☐ No

If yes, what SBA office?

When?

Number of employees:

(Includes full-time, part-time, temporary, seasonal, or periodic employees)

Gross sales or receipt of company for each of its most recently completed three fiscal years as of the date of bid or offer:

Year _____	\$ _____
Year _____	\$ _____
Year _____	\$ _____

TOTAL: \$ _____

Under 15 U.S.C. 645(d), any person who misrepresents its size status shall (1) be punished by a fine, imprisonment, or both; (2) be subject to administrative remedies; and (3) be ineligible for participation in programs conducted under the authority of the Small Business Act. I hereby certify that all information contained above, and in exhibits and attachments, are true and correct to the best of my knowledge and belief. I understand that this information is being submitted for the purpose of assisting Grunley Construction in making a size determination in order that my business may receive assistance under the laws and regulations administered by the U.S. Small Business Administration.

Signature: _____

Name and Title: _____

Date of Signing: _____

RETURN VIA E-MAIL, FAX OR MAIL TO:

Grunley Construction Company, Inc.
Small Business Compliance Office
15020 Shady Grove Road, Suite 500
Rockville, Maryland 20850
Phone: (240) 399-2000

E-Mail: adamgrunley@grunley.com

*****GRUNLEY USE ONLY*****

Project No.: _____

Project Name: _____

Accounting____ Purchasing____ Estimating____ SB Database____

HUBZone status has been verified in the Dynamic Small Business Search
(DSBS) as of ____/____/____, by _____.