



## **Small Business Mentoring Program Application and Pre-Qualification<sup>1</sup>**

### **INSTRUCTION FORM**

#### **GENERAL INFORMATION**

New York State has enacted legislation that authorizes Metropolitan Transportation Authority (“MTA”) and its operating agencies to establish a small business mentoring program (“SBMP”) for small construction industry contactors (annual revenues not exceeding \$ 3 million averaged over 3 years). A business admitted into the program will have the opportunity to learn how to do business with MTA and to compete for specific contracts that are designated for the SBMP. The MTA’s ultimate goal for the SBMP is to enlarge the pool of qualified contractors who can successfully compete as prime and subcontractors for projects outside of the program.

The SBMP will have two tiers, Tier 1 participation will be for a maximum period of 4 years. The assistance available to Tier 1 program participants who are ready, willing and able to commit to the program, is designed to help a small business overcome obstacles frequently encountered in seeking opportunities to do business with MTA:

- A professional construction management firm, TDX Construction Corporation, is under contract with MTA to serve as the Construction Manager for the SBMP (“CM”). CM will assist participants to acquire the knowledge and experience needed to compete for MTA construction projects and to perform those projects safely, on time and within budget.
- Mandatory training for technical and business issues, both general and specific to the needs of the individual SBMP contractor.
- The opportunity to compete with other selected SBMP contractors for small construction projects (up to \$ 1 million) that are specifically designated for the program.
- Access to SBMP small loan program provided by Carver National Bank to fund the start up costs of an SBMP contract awarded to an SBMP contractor.
- For SBMP construction projects awarded to an SBMP contractor, MTA’s typical insurance requirements for a construction project will be met: i) through MTA’s Owner Controlled Insurance Program (“OCIP”) which will provide workers compensation and general liability insurance coverage for on-site construction activities; and ii) through insurance provided by the

SBMP contractor, such as workers compensation and general liability insurance coverage for off-site activities, and automobile liability.

- An SBMP contractor competing for or awarded an SBMP contract will not be required to obtain a bid bond, payment bond or a performance bond from a surety company.
- Upon successful participation of the Tier 1 program, the opportunity to enter a Tier 2, or graduate program, defined elsewhere.

A small business wishing to participate in the SBMP must apply for admission and be prequalified by MTA for specific construction industry trades. The application and prequalification process is designed to ensure that participants in the SBMP have a sufficient foundation of experience, finances, skills, and integrity to demonstrate that, with the assistance provided by the SBMP, they can perform small MTA projects safely, on time and within budget. A firm that is prequalified and accepted into the SBMP and meets the requirements for continued participation in the program, will be eligible to participate in the basic program (Tier I) for up to 4 years. Upon graduation from the program, the graduate firm will be eligible to participate for up to 2 years in the Tier 2 graduate program.

When reviewing a firm's application, MTA's assessment will include a thorough evaluation of a variety of factors, taking into account that the firm is small and is seeking enrollment in the SBMP to gain the knowledge and experience it will need to do business with MTA. Factors evaluated will include:

- Experience generally and in specific construction industry trades.
- Quality and timeliness of past performance.
- Financial capability.
- Reliability and responsibility.
- Safety record.
- Licensing in the trade, where applicable.
- Certifications under State and Federal programs.
- Record of compliance with wage, hour and other State and Federal fair labor standards.
- Integrity of Key Persons, affiliates, current and past owners and principals.

## **EQUAL OPPORTUNITY**

All potentially qualified small construction businesses are encouraged to apply to the program, including small businesses that are currently participating in mentor programs operated by other public agencies, and small businesses that are certified for participation in state and federal MBE/WBE and DBE programs. MTA will afford all applicants with an equal opportunity for consideration, without discrimination because of race, creed, color, national origin, religion, sex, sexual orientation, age, disability or marital status.

## GENERAL INSTRUCTIONS

Please refer to the attached application and prequalification form. The form should be completed on behalf of the Applicant Firm by an individual who is knowledgeable about the past and present operations of the firm and how to obtain any additional required information that is not within his or her knowledge.

An Applicant Firm must answer each item on the application. If a particular question does not apply, insert "Not Applicable" (or "NA") as the response. Answers must be legible, preferably typed or, if hand written, printed in blue or black ink. If the space provided for an answer is insufficient, the Applicant should write on the form in the space for its answer "See Attached" and, provide its answer on a separate sheet of 8-1/2 X 11 paper, which should be attached to the application. The Applicant's name and the number for the item answered should be included at the top of the sheet of paper.

MTA reserves the right to request clarification, additional information and/or additional documentation from the Applicant Firm. By completing and submitting the application, the Applicant authorizes MTA and its Construction Manager, in connection with the evaluation of the Applicant, and the conduct of the SBMP if the Applicant is admitted into the program and prequalified, to conduct and update a background investigation of the firm including financial, credit, and performance history and integrity, and verification of the information provided.

An incomplete application will be rejected and returned to the applicant and, if the applicable submission deadline has not passed, for completion by the applicable deadline.

The Applicant Firm must send one signed and notarized original and one copy of the completed Application Form together with other attachments to the Construction Manager:

TDX Construction Corporation.  
Email to:  
[prequalunit@tdxconstruction.com](mailto:prequalunit@tdxconstruction.com)

or

Mail to:  
SBMP Prequalification  
TDX Construction  
345 7th Avenue  
New York, NY, NY 10001  
Telephone: (212) 279-1981

The name of the Applicant Firm must be clearly marked on the envelope. Receipt of an application will be acknowledged by email if the Applicant has specified an email address and, if no email address is specified, by letter. If an Applicant does not receive an acknowledgment, the Applicant should contact the Construction Manager.

## ELIGIBILITY FOR AWARD OF SBMP CONSTRUCTION CONTRACTS

MTA anticipates that a firm that is admitted into the SBMP and is in good standing in the program, will periodically be selected, along with other selected SBMP firms, to bid for small construction projects that have been designated by MTA for the SBMP and involve the trade(s) for which the firm has been prequalified. Selection of firms for such competition shall be in MTA's sole discretion. If the firm is invited to compete and is the lowest responsive bidder, before the contract is awarded to the firm, the firm will be required to successfully complete MTA's standard responsibility review, which will include completion of MTA's standard responsibility questionnaire. That review will be broader and more comprehensive than the review which resulted in the firm being admitted into the program and prequalified for specific trades. However, admission into the SBMP does not to any extent guarantee that an SBMP Contractor will be afforded the opportunity to compete for one or more SBMP contracts or will be awarded any such contract.

## REQUALIFICATION

Enrollment in Tier 1 is for a maximum period of 4 years. In order to enroll in the Tier 2 graduate program, a firm will be required to re-qualify for the program. A firm that expects to graduate from Tier 1 should apply for the re-qualification one year prior to its expected date of graduation from Tier 1.

If during the time a firm is enrolled in the SBMP, the firm becomes aware of a significant change in the information contained in the firm's application, the firm must promptly notify the SBMP Construction Manager.

## GETTING HELP

Questions regarding the Prequalification Application should be directed to the CM (contact information above).

## SUPPORTING DOCUMENTATION

For much of the application, an Applicant only needs to provide information in the space provided or on an attached sheet of paper. The following is a list of documentation that should be included with your application, when applicable. Look at the item number referenced for the details.

<b>Document(s) Required</b>	<b>Where specified on the application</b>
Legal document executed and, where applicable, filed to create the firm.	Item 3
Licenses where applicable.	Item 9A

<b>Document(s) Required</b>	<b>Where specified on the application</b>
As available, certified financial statements, or uncertified statements, for the immediate prior two calendar or fiscal years.	Item 21
Federal and New York State income tax returns-for the immediate prior two calendar years.	Item 22
The most recent three months of bank statements including copies of cancelled checks which are included with the statements.	Item 24
Documentation of bonding capacity, if any.	Item 25
Documentation of each line of credit the firm has, if any.	Item 26
Documentation of insurance coverages.	Item 28
Copy of the firm's written safety program, if any.	Item 34
Documentation of the firm's safety certification, license or training, if any.	Item 36
Copy of the firm's written quality assurance program, if any.	Item 37
Documentation of the firm's experience modification rating and OSHA data.	Item 39

## **1PERSONAL PRIVACY PROTECTION LAW NOTIFICATION**

The information the firm is providing on this application, including information about Key People pursuant to the authorization to conduct background investigations, is requested pursuant to the New York State Public Authorities Law for the purposes of MTA determining the Applicant Firm's enrollment and continued eligibility for the SBMP and for administering the SBMP and all related MTA programs and policies. Failure to provide the specified information and authorization requested may, in the sole discretion of the MTA, prevent your firm's enrollment or continued participation in the SBMP. If you are accepted into the SBMP, the information will be kept in a file maintained by MTA's Office of Construction Oversight, or other files maintained under the authority of the MTA. Information which, because of any name, number, symbol, mark or other identifier, can be used to identify a person ("Personal Information"), shall be received, maintained and used by MTA and the CM solely for the above stated purposes and will be protected from public disclosure to the fullest extent permitted by law.

## **Metropolitan Transportation Authority Small Business Mentoring Program**

### **✚ For any questions regarding the application process or the program please contact us:**

1. E-mail: [prequalunit@tdxconstruction.com](mailto:prequalunit@tdxconstruction.com)
2. Telephone:  
Aimee Howell, Thomas Johnson, or Wayne Cummings  
Telephone: 212-279-1981 Extension: 0637  
Direct Telephone #: 646-747-0637
3. Mailing Address:  
SBMP Prequalification  
TDX Construction Corporation  
345 7th Avenue  
NY, NY 10001

### **✚ Filling in the Application Template Form:**

1. Hit the Tab Button to advance to the next field. If you need to go back to a field, click on the field with your mouse.
2. Use the 'X' Key to fill in the checked boxes for the Yes or No responses.
3. When completely filled-in, mail to the address provided with all the required documents.
4. Thank you for your interest in the MTA's Small Business Mentoring Program.

### **✚ For other questions please contact:**

Paul Vitale  
Program Manager  
TDX Construction Corporation  
345 Seventh Avenue  
New York, NY, 10001

212 279 1981 main  
646 747-0635 direct  
Email: [pvitale@tdxconstruction.com](mailto:pvitale@tdxconstruction.com)

Visit us at: [www.tdxconstruction.com](http://www.tdxconstruction.com)

**Application for Admission and Prequalification**  
**METROPOLITAN TRANSPORTATION AUTHORITY**  
**Small Business Mentoring Program**

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**GENERAL INFORMATION**

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Legal Name of Applicant Firm:

Does the Applicant Firm do business or within the past five years has the Applicant Firm done business under any other name?  Yes  No

If yes, list each name and state whether you currently do business in that name:

Applicant Firm's Federal Employer Identification number\* ("FEIN"). If the firm does not have an FEIN, individual owner's social security number

\*See page 1 of the instructions for the Personal Privacy Protection Law Notification

**Business address:**

Street address (not a Post Office Box number):

City/County/State/Zip Code:

Is the business address also a person's residence?  Yes  No

If yes, name of person:

During the past five years, has the Applicant Firm changed its address?  Yes  No

If yes, list each prior address:

**Mailing Address** (if different) (a Post Office Box number may be used for mailing purposes):

Street Address:

City/County/State/Zip Code:

Telephone number:                      Fax Number

Web Address (if any):

E-mail address:

**Primary Application Contact**

Title:  Mrs.  Ms.  Mr.  Dr.  Other (specify)

Name:                      Business Title:

Primary Phone: Home                      Office                      Cell                      Other

Secondary Phone: Home                      Office                      Cell                      Other

E-Mail Address:

**Secondary Application Contact**

Name: \_\_\_\_\_ Business Title: \_\_\_\_\_  
 Primary Phone: Home \_\_\_\_\_ Office \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_  
 Secondary Phone: Home \_\_\_\_\_ Office \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Preferred method for written communications from MTA to the firm (complete only 1):  
 Email to: \_\_\_\_\_ Fax to: \_\_\_\_\_ US Mail to mailing Address: \_\_\_\_\_

**SECTION 1: BUSINESS ORGANIZATION, HISTORY AND OTHER INFORMATION**

*Subsection A: Applicant Firm's Legal Structure*

1. Month and year Applicant Firm founded:
2. Type of legal entity (For example, sole proprietorship owned and operated by one individual, corporation, limited liability company, general partnership, limited partnership, limited liability partnership, joint venture):
3. If available, attach with your application a copy of the certificate of incorporation, partnership agreement, or other legal document creating the firm. Is the legal document attached?  Yes  No  
 If not attached, explain why:
4. State in which the firm was legally created and organized:
5. If Applicant Firm was not created and organized in New York, is the Applicant Firm authorized to do business in New York State?  Yes  No  
 If yes, provide the state or local office where the firm filed the required legal documents (Secretary of State or County Clerk): \_\_\_\_\_ If no, explain: \_\_\_\_\_

*Subsection B: Applicant Firm's Current Lines of Business*

6. Briefly describe Applicant Firm's line(s) of business and whether your firm typically acts as a prime contractor or subcontractor:
7. List Applicant Firm's three largest projects within the past three years and, for each project, state whether Applicant Firm was a prime or subcontractor and the dollar value of the project to the Applicant Firm:
  - 1.
  - 2.
  - 3.
8. Trade codes: Based on Attachment A enter below: (i) all building trade codes for trades in which Applicant Firm has been actively engaged and for which the Applicant Firm is requesting prequalification; and (ii) for each trade code, whether the three year average of work for the code is over or under \$ 1million. For each trade code selected, Applicant Firm will be required to provide commercial references for work completed within the past three years (See page 6, Item 20).

Code(s):	Code(s):	Code(s):	Code(s):	Code(s):
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<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m
Code(s):	Code(s):	Code(s):	Code(s):	Code(s):
<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m	<input type="checkbox"/> <\$1m <input type="checkbox"/> >\$1m

*Subsection C: Licenses, Certifications, Collective Bargaining Relationships and Other Mentor Programs*

9. Does the Applicant Firm have any trade or business related licenses from the State of New York or any locality within New York State?  Yes  No If yes:

A. Attach a copy of each license. Is each license attached?  Yes  No

B. If no, please explain why:

C. Is the license issued to a specific individual in the Applicant Firm?  Yes  No  
 If yes, specify the individual's name:

10. Check off each of the following certifications Applicant Firm currently has, if any. If applicable, list agency(ies) that issued the certification.

New York State Minority-owned Business Enterprise or Woman-owned Business Enterprise Certification

Federal Disadvantaged Business Enterprise Certification

Economic Development Local Business Enterprise Certification

Other (List):

11. Does the Applicant Firm participate in any industry-wide or other collective bargaining agreement with any trade union?  Yes  No If yes, list collective bargaining agreement(s):

12. Does the Applicant Firm currently participate in any public or private sector mentoring or mentoring type program?  Yes  No

If yes, specify the name and address of the program(s):

*Subsection D: Owners, Key Persons and Employees*

13. List the name of each person who has an ownership interest in the Applicant Firm and each person's home address, title and role within the firm, and percentage of ownership:

Name:

Home Address:

Title:

Role:

Percentage ownership:

Name:  
 Home Address:  
 Title:  
 Role:  
 Percentage ownership:

Name:  
 Home Address:  
 Title:  
 Role:  
 Percentage ownership:

14. List below the name of each person, other than an owner, who is a key person within the Applicant Firm and, for each key person, provide the information specified below. For purposes of this section, a “key person” is any of the following **who is not listed above as an owner**:

- A director, officer, member, or owner.
- Any person in a position to significantly control and direct the firm’s overall operations or financial decisions.
- Any person in a position to significantly control and direct the firm’s performance of any project.
- Signatories to bank accounts.
- Holders of licenses necessary for the Applicant Firm to engage in a building trade.

**Table of Key People (complete all boxes. Provide a resume for each Key Person listed).**

	<b>Key Person #1</b>	<b>Key Person #2</b>	<b>Key Person #3</b>
<b>Title Name</b>			
<b>Home Phone Number and Address</b>			
<b>Business Title and Role</b>			
<b>Commencement Date in Current title</b>			
<b>Professional Licenses, Certifications, Trade Qualifications and Affiliations</b>			

15. Below, enter the number or approximate number of Applicant Firm’s personnel, including key persons identified above. If the number varies, list the typical upper and lower limits of the range.

- A. Persons who work full-time for the Applicant Firm and annually receive an IRS W-2 form
- B. Persons who work part-time for the Applicant Firm and annually receive an IRS W-2 form
- C. Persons who work for the Applicant Firm full or part-time as independent contractors and annually receive an IRS 1099 form
- D. Persons who work full- or part-time for the Applicant Firm in a capacity not listed above




20. For each construction trade in which Applicant Firm is actively engaged and for which Applicant Firm is requesting prequalification (item 8 on this form) provide the following information for construction prime contracts and subcontracts completed within the current year and the past three years. Applicant Firm must provide a minimum of four commercial references for each trade code selected. Duplicate and complete the chart for each trade code.

	<b>Project #1</b>	<b>Project #2</b>	<b>Project #3</b>	<b>Project 4</b>
Trade Codes***				
Agency/Owner/Developer				
General Contractor on Project (If Applicant Firm insert "Applicant")				
Project Name and Address				
Project Contract #				
Work Performed on Project*				
Applicant Firm's Contract \$ Amount				
Start and Completion Date of Applicant Firm's Contract				
Name of Representative from Agency/Owner/Developer Familiar with Applicant Firm's Performance**				
Title and Phone # of				

Representative				
Was Applicant a Prime or a Subcontractor?				

- \* Specifically provide the work performed and in what capacity, e.g., general contractor, subcontractor, construction manager, etc.
- \*\* Representative cannot be affiliated or related to any key person of the Applicant Firm.
- \*\*\*Enter applicable trade codes from the answer to item 8.

**SECTION 3: FINANCIAL AND RELATED INFORMATION**

21. Provide a copy of all of Applicant Firm’s financial statements, as available, for the immediate prior two calendar or fiscal years. Provide certified financial statements if they exist. If such statements are not available, provide uncertified statements.

Financial Statements provided:  Yes  No

If not provided, explain why:

22. Provide copies of all the Applicant Firm’s Federal and New York State income tax returns for the immediate prior two calendar or fiscal years.

Federal and New York State income tax returns provided:  Yes  No

If not provided, explain why:

23. Enter information for each business bank account held by the Applicant Firm.

Name on Account	Type of Account	Bank Name and Address	Names of ALL Signatories*

\* Note: A Signatory by definition is a Key Person.

24. Provide copies of the Applicant Firm’s three most recent bank statements, including copies of cancelled checks.

Bank statements including copies of cancelled checks enclosed.  Yes  No

If not enclosed, explain why:

25. Does the Applicant Firm have bonding capacity? (Please note that bonding capacity is not a requirement for prequalification or the award of a contract in the program)  Yes  No

If yes, provide copies of documentation showing your bonding capacity and provide the following information for each surety company that has currently agreed to furnish the Applicant Firm with performance and payment bonds.

<b>Surety Name and Address</b>	<b>Agent/Broker Name and Phone # (not toll-free)</b>	<b>Names and Addresses of Other Persons or Entities Whose Indemnity the Surety Company Relies on</b>	<b>Single Job Bonding Capacity (\$)</b>	<b>Aggregate Bonding Capacity (\$)</b>

26. Does the Applicant Firm have one or more lines of credit?  Yes  No  
If yes,

A. Provide a current letter from each financial institution that is providing you with a line of credit that states the amount of the line of credit and its current status.

B. Complete the information below.

<b>Financial Institution's Name and Address</b>	<b>Names and Addresses of Others Whose Guarantee the Financial Institution Relies On</b>	<b>Single Job Line of Credit Limit Capacity (\$)</b>	<b>Aggregate Line of Credit Limit (\$)</b>

27. Has the Applicant Firm ever defaulted on a loan from a financial institution?  Yes  No

If yes, provide details:

28. Attach a copy of documentation that lists Applicant Firm's current insurance coverages, including names of insurance companies, types of coverage and limits. Attached:  Yes  No

If no, explain why:

**SECTION 4: CONTRACT PERFORMANCE AND CLAIMS**

29. Has the Applicant Firm ever failed to complete a contract?  Yes  No

If yes, provide details for each such failure (attach a separate sheet if necessary):

30. Has the Applicant Firm ever defaulted on a contract that was bonded?  Yes  No

If yes, provide details for each such failure (attach a separate sheet if necessary):

**SECTION 5: SAFETY, OPERATIONS AND INSURANCE**

31. During the past five years, has any personal or bodily injury or workers compensation claim been made against the Applicant Firm?  Yes  No

If yes, for each claim provide the following details. If a claim was not covered by insurance, enter "None" for the insurance company.

Type of Claim	Insurance Company	Date Claim Filed	Claimant	Claim Amount	Disposition	Summary Details

32. During the past five years, has the Applicant Firm been charged with any violation by the Occupational Safety and Health Administration ("OSHA"), including charges that were dismissed?  Yes  No

If Yes, in the section below, list the number of OSHA violations and the number that were issued as "Serious," "Willful," "Repeat," or "Failure to Abate Penalty." Go to [www.osha.gov](http://www.osha.gov) for further information.

	Number of Violations	Serious	Willful	Repeat	Failure to Abate	Disposition
Year 1						
Year 2						
Year 3						
Year 4						
Year 5						

33. Other than under OSHA, during the past five years, has the Applicant Firm been charged with any violation of any Federal, State, or local law or regulation governing the conduct of the Applicant Firm's business including but not limited to a licensing statute, building code, wage and hour law, prevailing wage law, and the Immigration Reform and Control Act of 1986, as amended?  Yes  No

If Yes, provide details below:

	Summary of Violation Charged	Disposition
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		

34. Does the Applicant Firm have a written safety program?  Yes  No If Yes, attach a copy.

35. Provide the name and title of the highest-ranking employee of the Applicant Firm responsible for safety:

36. Does the Applicant Firm or any employee have a current relevant safety certification, license, or training?  Yes  No

If Yes:

- A. Provide a copy of documentation of such certification, license or training.
- B. List below each type of certification, license or training of Applicant firm's employees and specify the number of employees who have such certification, license, or training.

Type of Certification License, Number of Employees or Training

37. Does the Applicant Firm have a written quality assurance program?  Yes  No  
 If Yes, attach a copy.

38. Provide the following information and documents for the current year and previous calendar year:

	Current year	Prior calendar year
EMR (Experience Modification Rating):		
Number of OSHA Recordable Cases:		
Total Days Away from Work:		
Number of Fatalities:		

39. Provide a copy of the information page from Applicant Firm's worker's compensation policy showing the Applicant Firm's EMR, and OSHA 300 log or, if this information is not available, provide this information in a letter to Applicant Firm from its workers compensation insurance company.

**SECTION 6: INTEGRITY**

<p>THE FOLLOWING QUESTIONS MUST BE ANSWERED “YES” OR “NO”: (In the event of a “YES”, Applicant Firm must provide all relevant information on a separate sheet annexed hereto, and the MTA reserves the right to inquire further with respect hereto.)</p> <p>40. To the best of your knowledge after diligent inquiry, in connection with the business or any other firm which is related to Applicant by any degree of common ownership, control, or otherwise, do any of the following statements apply to: (i) Applicant, Applicant’s parent, an Applicant subsidiary or affiliate (if any); (ii) any joint venture (including its individual members) and any other form of partnership (including its individual members) which includes Applicant or Applicant’s parent, an Applicant’s subsidiary, or affiliate, (iii) an Applicant’s Key Person (see definition in 14 above), managerial employee, and any person or entity with a 10% or more interest in Applicant; (iv) any legal entity controlled, or 10% or more of which is owned, by Applicant, or by any Key Person, managerial employee of Applicant, or by any person or entity with a 10% or more interest in Applicant.</p>	
<p>a) Within the past 10 years, has been convicted of a felony and/or any other crime related to truthfulness in connection with business conduct.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>b) Has pending before any state or federal grand jury or court an indictment or information alleging the commission of a crime which has not been favorably terminated.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>c) Is the subject of a pending investigation by any grand jury, commission, committee or other entity or agency or authority of any local, state, or the federal government in connection with the commission or alleged commission of a crime?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>d) Is currently disqualified from selling or submitting bids/proposals to or receiving awards from or entering into any contract with any federal, state or local government agency, any public authority or any other public entity.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>e) Within the past five years, has refused to testify or to answer any question concerning a bid or contract with any federal, state, or local government agency, any public authority or any other public entity when called before a grand jury or other committee, agency or forum which is empowered to compel the attendance of witnesses and examine them under oath, upon being advised that neither the person’s statement nor any information or evidence derived from such statement will be used against that person in any subsequent criminal proceeding.</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>f) Is currently disqualified from selling or submitting a bid to, or receiving an award from, or entering into any contract with any public entity or public authority within the State of New York because, within the past five (5) years, such entity or person refused to testify or to answer any relevant</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>

<p>question concerning a transaction or contract with the State of New York, any political subdivision of the state of New York, or a public authority or a public department, agency or official of the State of New York or of a political subdivision of the State of New York, when called before a grand jury or other state or local department, commission or agency which is empowered to compel the attendance of witnesses and examine them under oath, upon being advised that neither that person's statement nor any information or evidence derived from such statement will be used against that person in any subsequent criminal proceeding.</p>	
<p>g) In the past ten years, entered into a consent decree involving a criminal charge, deferred prosecution agreement, or non-prosecution agreement.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES
<p>h) Has within a ten year period preceding completion of this Application, been convicted of or had a civil judgment rendered against them for: (i) commission of fraud or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; (ii) collusion with another person or entity in connection with the submission of bids; (iii) violation of federal or State antitrust statues of False Claims Acts; (iv) or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement or receiving stolen property.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES

**CERTIFICATION ON BEHALF OF APPLICANT**

This certification must be completed and signed by a person who is an owner and a director, officer, or member of the Applicant firm and is sufficiently knowledgeable about the Applicant firm to confirm the accuracy and completeness of the information provided by the Applicant as its responses to the items in this form. The person's signature must be notarized by a notary who is not a Key Person in the firm (see item 14 for who is a Key Person), nor a relative of the person signing a certification.

**A MATERIAL FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR REJECTION OF THE APPLICATION. IN ADDITION, SUCH FALSE SUBMISSION MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT OR OMISSION TO CRIMINAL CHARGES,**

I [Insert full name] being duly sworn, under penalties of perjury, hereby state as follows:

I am [insert title] of [insert applicant's name] the Applicant Firm that is applying for Admission to and Prequalification for the Metropolitan Transportation Authority's Small Business Mentoring Program

I have read and understand the questions and information submission requirements contained on the application.

I certify that I am sufficiently knowledgeable about the Applicant firm to confirm the accuracy and completeness of the information provided by Applicant as its responses to the items in this form and that, to the best of my knowledge, the information given in response to each item on this form, is full, complete and truthful.

I acknowledge that the Metropolitan Transportation Authority may, by means it deems appropriate, determine the accuracy and truth of the statements made and information provided in the application.

I recognize that all the information submitted in the application, is for the express purpose of inducing the Metropolitan Transportation Authority to qualify the Applicant firm for admission to and prequalification for the Metropolitan Transportation Authority Small Business Mentoring Program.

I agree and warrant that truthfully answering the questions and submission requirements is

an event entirely within my control.

I authorize the Metropolitan Transportation Authority to do the following and confirm that I am duly authorized by the Applicant Firm to make this authorization:

- To contact any entity or person named in the application for purposes of verifying the information supplied by the Applicant firm.
- To conduct any background investigation it deems appropriate.

While the Applicant firm's application is pending and, if the Applicant firm is accepted into the Metropolitan Transportation Authority Small Business Mentoring Program, during the firm's enrollment in the Small Business Mentoring Program, I will notify the Metropolitan Transportation Authority of any significant change to any of the information submitted, promptly and, in any case, within 30 days of the event.

Sign here: \_\_\_\_\_

State of \_\_\_\_\_  
County of \_\_\_\_\_

On \_\_\_\_\_, 201\_\_\_\_\_, before me personally came and appeared \_\_\_\_\_ by me known to the person to signed this document and who swore to me that the statements set forth in this certification are accurate and complete.

Notary Public's signature \_\_\_\_\_

Notary Public's name: \_\_\_\_\_

Notary Public's stamp:

**ATTACHMENT A**

**MASTER FORMAT CODES**

0000	UTILITY TRENCH	0550	METAL FABRICATIONS
0100	QUALITY REQUIREMENTS	0550	SHEET METAL FABRICATION
0140	QUAL. CONTROLLED SAMPLE TEST & DISP SRVC	0600	HYDRAULIC STRUCTURES
0150	TEMP CONSTR-BRIGS-OF-COVERPASS	0650	RAILROAD WORK
<b>02000</b>	<b>ALL DIVISION 2 - SITEWORK</b>	0700	ORNAMENTAL METAL
0210	REMOVAL OF TOXIC/HAZ SITE MTRLS	0800	EXPANSION CONTROL
0211	UNDERGROUND STORAGE TANK RMVL	<b>08000</b>	<b>ALL DIVISION 8 - WOOD AND PLASTICS</b>
0212	OFF-SITE TRANSPORT & DISPOSAL	0805	FASTENERS AND ADHESIVES
0214	GROUNDWATER TREATMENT SYSTEMS	0810	WOOD TREATMENT
0217	COFFERDAMS	0815	ROUGH CARPENTRY
0218	REMEDIATION SOIL STABILIZATION	0816	HEAVY TIMBER CONSTRUCTION
0220	SITE PREPARATION	0817	PREFABRICATED WOOD/METAL JOISTS
0221	SUBSURFACE INVESTIGATION	0820	FINISH CARPENTRY
0222	DEMOLITION	0840	ARCHITECTURAL WOODWORK
0224	DEWATERING	0850	PREFAB STRUCTURAL PLASTIC
0225	SHORING AND UNDERPINNING	0860	PLASTIC FABRICATIONS
0230	EXCAVATION SUPPORT SYS/COFFERDAMS	<b>09000</b>	<b>ALL DIVISION 7 - THERMAL/MOIST PROTECT</b>
0230	EARTHWORK	0910	WATERPROOFING
0230	MAINE WORK	0911	DAMP PROOFING
0240	TUNNELING	0912	TRAFFIC TOPPING
0245	PILES AND CASINGS	0920	THERMAL INSULN - VAPORBAR RETARDERS
0250	PIPED UTILITY MAINS	0930	SHINGLES AND ROOFING TILES
0250	WATER DISTRIBUTION	0940	PREFORMED ROOFING & CLADDING/SIDING
0250	GAS DISTRIBUTION	0941	METAL ROOFS AND WALL PANELS
0260	SEWER MAINS AND DRAINAGE	0950	MEMBRANE ROOFING
0260	HEATIFICATION OF UNDERGROUND MAINS	0950	FLASHING AND SHEET METAL
0265	PONDS AND HOLDAYS	0970	ROOF SPECIALTIES/SACCE COURSES
0270	PAVING AND SURFACING	0980	FIRE & SMOKE PROTECTION
0280	SITE IMPROVEMENTS	0981	SPRAY ON FIRE PROOFING
0282	FENCES AND GATES	0982	FRS STOPPING
0290	LANDSCAPING	0990	JOINT SEALERS
<b>03000</b>	<b>ALL DIVISION 3 - CONCRETE</b>	<b>09900</b>	<b>ALL DIVISION 8 - DOORS AND WINDOWS</b>
0310	CONCRETE FORMWORK	09100	METAL DOORS AND FRAMES
0315	CONCRETE ACFS COURSES	0920	WOOD AND PLASTIC DOORS
0320	CONCRETE REINFORCEMENT	0925	DOOR OPENING ASSEMBLIES
0330	CAST-IN-PLACE CONCRETE	0930	SPECIAL DOORS
0335	CONCRETE CURING	0940	ENTRANCES AND STOREFRONTS
0340	PRECAST CONCRETE	0950	METAL WINDOWS
0345	CEMENTITIOUS	0955	WOOD AND PLASTIC WINDOWS
0350	GROUT	0960	SPECIAL WINDOWS
0370	MASS CONCRETE	0965	SKYLIGHTS
0390	CONCRETE RESTORATION/CLEANING	0970	HAIRWARE
<b>04000</b>	<b>ALL DIVISION 4 - MASONRY</b>	0972	INSTALLATION WINDOW COARDS
0400	MORTAR	0980	GLAZING
0405	MASONRY ACCESSORIES	0990	GLAZED CURTAIN WALLS
0410	UNIT MASONRY	<b>09900</b>	<b>ALL DIVISION 9 - FINISHES</b>
0440	STONE	09100	METAL SURFACES AND FRAMING
0450	TILE FACTORIES	09200	LATH AND PLASTER
0460	CORROSION RESIST MASONRY	09250	GYPSPUM BOARD
0460	MASONRY RESTORATION/CLEANING	09300	TILE
<b>05000</b>	<b>ALL DIVISION 5 - METALS</b>	09400	TERRAZZO
0500	METAL MATERIALS	09510	ACOUSTICAL TREATMENT
0505	METAL FASTENERS	09545	SPECIAL SURFACES
0510	METAL FASTENING	09600	STONE FLOORING
0515	STRUCTURAL METAL FRAME	09610	FLOOR TREATMENT
0517	STRUCTURAL STEEL	09620	SPECIAL FLOORING
0520	METAL JOISTS	09630	UNIT MASONRY FLOORING
0525	METAL DECKING	09640	WOOD FLOORING
0540	COLD FORMED METAL FRAMING	09650	RESILIENT FLOORING

0960	CARPET	11700	MEDICAL EQUIPMENT
09700	WALL COATING	11790	MORTUARY EQUIPMENT
09770	ACQUISITION COATING/SPECIAL FINISH	11850	NAVIGATION EQUIPMENT
09800	SPECIAL COATINGS	12000	ALL DIVISION 12 - FURNISHINGS
09900	PAINTING	12000	FABRICS
10000	ALL DIVISION 10 - SPECIALTIES	12100	AIRWORK
10100	CHALKBOARDS/STACKBOARDS	12300	MANUFACTURED CASPWORK
10150	COMPARTMENTS AND CURBS	12400	FURNITURE AND ACCESSORIES
10200	DOORS AND VENTS	12480	BUGS AND MATS
10240	GRILLES AND SCREENS	12490	WINDSHY TREATMENT
10250	SERVICE WALL SYSTEMS	12500	MARBLE SEATING
10280	WALL AND COVER GUARDS	12800	INTERIOR PLANTS AND PLANTERS
10270	ACCESS FLOORING	13000	ALL DIVISION 13 - SPECIAL CONSTRUCTION
10290	FEST CONTROL	13100	UNSUPPORTED STRUCTURES
10300	FIREPLACES AND STOVES	13200	INTEGRATED ASSEMBLIES
10340	PREFAB EXTERIOR SPECIALTY	13300	SPECIAL PURPOSE ROOMS
10350	FLAGPOLES	13600	SONO-VIBRATION/SEISMIC CONTROL
10400	IDENTIFYING DEVICES	13700	RADIATION PROTECTION
10400	PEDESTRIAN CONTROL DEVICES	13100	LIGHTNING PROTECTION
10500	LOCKS	13120	FIRE INWARD STRUCTURE/PLY MODULED
10520	FIRE PROTECTION SPECIALTIES	13150	POOLS
10530	PROTECTIVE COVERS	13175	ICE RAMPS
10550	PORTAL SPECIALTIES	13185	KENNEL/ANIMAL SHELTER
10600	PARTITIONS	13190	SOIL CONSTRUCTED INCINERATORS
10610	OPERABLE PARTITIONS	13200	LIQUID GAS STORAGE TANKS
10670	STORAGE SHELVING	13270	FILM UNDERFILMS/MEDIA
10700	EXTERIOR SUN CONTROL DEVICE	13270	DIRECTION TANK COVERS & APPURT
10710	TELEPHONE SPECIALTIES	13400	OXYGENATION SYSTEMS
10800	TOILET BATH ACCESSORIES	13290	SLUDGE CORROSION SYSTEM
10890	SEALS	13290	HAZMAT REMED - LEAD PAINT REMOVAL
10900	WARDROBE/CLOSET SPECIALTY	13295	HAZMAT REMED - ASBESTOS ABTMENT & REM
10900	FALL PROTECTION SYSTEMS	13290	HAZMAT REMED - MICROBIAL REMED
11000	ALL DIVISION 11 - EQUIPMENT	13400	MEASUREMENT & CONTROL INSTR
11010	MAINTENANCE EQUIPMENT	13500	RECORDING - INDUSTRIAL INSTR
11020	SECURITY/AUTL EQUIPMENT	13500	TRANSPORTATION CONTROL INSTR
11030	TELESERVICE EQUIPMENT	13500	SOLAR ENERGY SYSTEMS
11040	ECOLOGICAL EQUIPMENT	13600	WIND ENERGY SYSTEMS
11050	LIBRARY EQUIPMENT	13700	SECURITY ACCESS AND SURVEILLANCE
11060	THEATRICAL EQUIPMENT	13800	BUILDING AUTOMATION SYS & CONTRLS
11070	HOSPITAL EQUIPMENT	13850	DETECTION & ALARM
11080	REDISTRIBUTION EQUIPMENT	13900	FIRE SUPPRESSION/AUTHERV SYSTEMS
11090	CHECKROOM EQUIPMENT	14000	ALL DIVISION 14 - CONVEYING SYSTEMS
11100	MERCANTILE EQUIPMENT	14100	TAMM/WATER
11110	CLIMATE/CLIMATE LAUNDRY/RYE/STEAN	14200	ELEVATORS
11120	WELDING EQUIPMENT	14300	MOVING STAIRS/AND WALKS
11130	ALCOH-VISUAL EQUIPMENT	14400	SETS
11140	VEHICLE SERVICE EQUIPMENT	14440	SIDEWALK LIFTS
11150	PARKING CONTROL EQUIPMENT	14000	MATERIAL HANDLING SYSTEM
11160	LOADING DOCK EQUIPMENT	14600	HOOKS AND CRANES
11170	SOLID WASTE HANDLING EQUIP	14700	TURNABLES
11190	DETENTION EQUIPMENT	14800	SCAFFOLDING
11200	WATER SUPPLY/TREATMENT	14900	TRANSPORTATION
11280	HYDRAULIC GATES/VALVES	15000	ALL DIVISION 15 - MECHANICAL
11300	FLUID WASTE DISPOSAL EQUIPMENT	15000	BASIC MECHANICAL MATHS/METHODS
11400	FOOD SERVICE EQUIPMENT	15000	MECHANICAL INSULATION
11450	RESIDENTIAL EQUIPMENT	15100	HEATING & COOLING PIPING (STEAM/HTTING)
11460	UNIT KITCHENS	15180	FUEL PIPING
11470	DARKROOM EQUIPMENT	15270	LUBRICATING OIL SYSTEMS
11480	AIR/RECREATION/THERAPY EQUIPMENT	15300	FIRE PROTECTION
11500	INDUSTRIAL/PROCESS EQUIPMENT	15400	PLUMBING
11500	LABORATORY EQUIPMENT	15600	HEAT GENERATION
11550	PLANTARIUM EQUIPMENT	15530	ELECTRIC RESISTANCE HEATING
11560	OBSERVATORY EQUIPMENT	15600	REFRIGERATION
11600	OFFICE EQUIPMENT	15700	HEATING VENTS & AIR CONDITION
1160000			

15100 HEAT TRANSFER ENERGY RECOVERY	37045 HEATING/VENTILATION/ AIR CONDITIONING
15800 AIR DISTRIBUTION/DUCTWORK	37047 HISTORICAL PRESERVATION
15810 DUCT CLEANING	37055 INTERIOR DESIGN
15820 AIR HANDLING	37056 IRRIGATION/DRAINAGE
15830 CONTROLS	37057 KITCHENS
15950 HEATING/VALVE/RING/BALANCE	37058 LANDSCAPE ARCHITECTURE
16000 ALL DIVISION 16 - ELECTRICAL	37060 LIBRARIES
16050 BASIC ELECTRICAL MATERIALS/METHODS	37061 LIGHTING (Interior)
16080 ELECTRICAL TESTING	37062 LIGHTING (Exterior)
16100 WIRING METHODS	37063 MODULAR SYSTEMS/PRE-FABRICATED STRUCTURES
16200 POWER GENERATION	37070 PLANNING - COMMUNITY ZONING
16300 HIGH VOLTAGE DISTRIBUTION - 600V+	37078 PLANNING - SITE/PROJECT SPACE
16400 MEDIUM VOLTAGE DISTRIBUTION - 600V & LESS	37080 PLUMBING/PLUMBING DESIGN
16500 LIGHTING	37081 PNEUMATIC STRUCTURES/SUPPORT BUILDINGS
16550 OPTICAL SYSTEMS	37088 RECREATIONAL FACILITIES (Parks, Playgrounds)
16700 COMMUNICATIONS	37089 REHABILITATION - BUILDING/STRUCTURE/FACILITIES
16710 COMMUNICATION CIRCUITS	37090 ROOFING CONSULTANTS
16800 SOUND AND VIDEO (TV STUDIOS)	37093 SAFETY/ACCIDENT STUDIES/SOFTWARE STUDIES
16810 SURVEILLANCE CAMERAS/CAT SCAT S	37094 SECURITY SYSTEMS/FIRE & SMOKE DETECTION
20019 SPEC - PLUMBING & DRAINAGE - LARGE ARCHITECTONIC WORKS	37095 SEISMIC DESIGN AND STUDIES
31000 ARCH - MODIFICATIONS/SPECIAL ENHANCEMENTS	37096 SHOP EQUIPMENT
31025 ARCH - NEW CONSTRUCTION/SPECIAL ENHANCEMENTS	37097 SOILS AND GEOLOGICAL STUDIES/FOUNDATIONS
31010 ARCH - OTHER SPECIALS (USE WITH PROFILE CODES)	37102 SURVEYING
31015 ARCHITECTURAL - FULL SERVICE FIRM	37103 SWIMMING POOLS
32000 ENGR - MODIFICATIONS/SPECIAL ENHANCEMENTS	37106 TESTING/INSPECTION SERVICES
32025 ENGR - NEW CONSTRUCTION/SPECIAL ENHANCEMENTS	37107 TRAFFIC/TRANSPORTATION ENGINEERING
32010 ENGINEERING - ELECTRICAL	37111 UTILITIES (Gas/Water)
32015 ENGINEERING - MECHANICAL	37112 VALUE ENGINEERING/ANALYSIS
32020 ENGINEERING - PLUMBING	37115 WATER SUPPLY - TREATMENT AND DISTRIBUTION
32025 ENGINEERING - MECHANICAL	37117 WETLAND USE STUDIES
33000 ENGINEERING - MECHANICAL FULL SERVICE FIRM	80000 VENDOR/SUPPLIER CODES
33000 ENGINEERING - CIVIL/STRUCTURAL	80000 ALARMS/SECURITY SYSTEMS
33005 ENGR - OTHER SPECIALS (USE WITH PROFILE CODES)	80005 ATHLETIC EQUIPMENT
33040 ENGR FUEL SERVICE	80010 AUDIOVISUAL EQUIPMENT
33050 ARCH & ENG - FULL SERVICE FIRM	80015 AUTOMOBILES
34000 ARCH & ENG - UNCLASSIFIED	80020 BUSES
35000 CONSTRUCTION MANAGERS	80025 CLEANING/MAINTENANCE
36000 CONSTR RELATED SVCS (USE WITH PROFILE CODES)	80030 COMPUTER HARDWARE
37000 TOPOGRAPHICAL MAPPING	80035 COMPUTER MAINTENANCE
37005 TOPOGRAPHICAL MAPPING	80040 COMPUTER SOFTWARE
37001 ACUSTICAL/NOISE ABATEMENT	80045 CORNER SUPPLIES
37002 ADA COMPLIANCE	80050 CORNERS
37004 AIR POLLUTION CONTROL	80055 DATA ENTRY
37005 ASBESTOS INSPECTION	80060 DECORATIVE ACCESSORIES
37006 ASBESTOS MGMT PLAN/REVISION	80065 DELIVERY SERVICES (CARRIER)
37008 AUDIT/INVESTIGATION	80070 ELECTRICAL SUPPLIES
37009 AUTOMATION CONTROL/STR ENERGY MGMT SYS	80075 ELECTRICAL EQUIPMENT
37011 BOILER/ENERGY	80080 EQUIPMENT
37015 BUILDING CODES STANDARDS/ORDINANCES	80085 EQUIPMENT (LEASING) (RENTALS)
37016 COMM SYSTEMS - TV/MICROWAVE/TELEPHONE	80090 FENCES
37019 COMPUTER FACILITIES/COMPUTER SERVICE	80095 FLOORING
37020 Computer Aided (Design & Drafting) (CAD)	80100 FOOD
37021 CONSTRUCTION MANAGEMENT	80105 FOOD SERVICE
37022 CONTROLLED INSPECTION	80110 FURNISHINGS
37023 COST ESTIMATING	80115 FURNITURE DESIGN
37025 EDUCATIONAL FACILITIES/CLASSROOMS	80120 HVAC EQUIPMENT
37031 ELEVATORS/SCALATORS/PEOPLE-MOVERS	80125 KITCHEN EQUIPMENT
37032 ENERGY CONSERVATION/NEW ENERGY SOURCES	80130 LANDSCAPE EQUIPMENT
37033 ENVIRONMENTAL IMPACT STUDIES/ASSESSMENTS	80135 LIBRARY FURNITURE
37034 EXTERIOR RESTORATION	80140 LITERATURE DESIGN
37035 FLEXIBLE HOUSES/GYMNASIUMS	80145 LOCKERS/LOCKER EQUIPMENT
37036 FIRE PROTECTION	80150 MAIL/POSTAGE
37037 FORECAST ENGINEERING	80155 MEMBERSHIP/SUBSCRIPTIONS/LICENSE FEES
37041 GRAPHIC DESIGN/STORAGE	80160 MICROFILM/FICHE SERVICES
800000	

- 9999 GENERAL CONTRACTOR
- 80150 MOVING
  - 80170 MEDICAL EQUIPMENT
  - 80175 N.Y.S. REQUEST FOR HANDICAPPED
  - 80180 OFFICE EQUIPMENT (MAINTENANCE/REPAIR)
  - 80190 OFFICE FURNITURE
  - 80200 OFFICE SUPPLIES
  - 80205 OFFICE
  - 80210 PARKING
  - 80220 PHOTOGRAPHIC SERVICES
  - 80225 PRINTING
  - 80230 PUBLICATIONS
  - 80235 RECORDS MANAGEMENT SYSTEM
  - 80240 REUSE WASTE EQUIPMENT
  - 80250 REPROGRAPHIC
  - 80255 RUBBISH REMOVAL
  - 80260 SAFETY EQUIPMENT
  - 80265 SHELVING/COMPARTMENTS
  - 80270 SIGN EQUIPMENT
  - 80280 SIGNAGE
  - 80285 SUPPLIES
  - 80290 TELECOMMUNICATION EQUIPMENT
  - 80295 TEXTBOOKS
  - 80300 TRAILERS
  - 80305 TRANSPORTATION
  - 80310 TRUCKS
  - 80315 VEHICLE MAINTENANCE/REPAIR
  - 80320 VEHICLE DUPLICATION
  - 80325 WINDOW EQUIPMENT
  - 80330 METAL ROOFING SYSTEMS
  - 80335 SERVICES
  - 80340 WINDOW EQUIPMENT
  - PROFESSIONAL SERVICE PROVIDER CODES
  - 80350 ACCOUNTANTS/DIRECTORS
  - 80355 ADVERTISING
  - 80360 PROFESSIONAL SERVICES - NON CONSTRUCTION
  - 80365 ATTORNEYS/LEGAL SERVICES/LAWYERS
  - 80370 BUSINESS SYSTEMS
  - 80375 COMPUTER HARDWARE/SOFTWARE
  - 80380 COMPUTER DESIGN & DEVELOPMENT
  - 80385 ENVIRONMENTAL CONSULTING SERVICES
  - 80390 ASSESSMENT CONSULTANTS
  - 80395 LEAD CONSULTANTS
  - 80400 HAZMAT/LEAD CONSULTANTS
  - 80405 HAZMAT/LEAD CONSULTANTS: SOIL/GROUND  
WATER RESPONSE, GEOSCIENCE/GEOLGY
  - 80410 FINANCIAL SERVICES
  - 80415 INFORMATION TECHNOLOGY CONSULTANT
  - 80420 INSURANCE
  - 80425 INVESTIGATION/PSY
  - 80430 MANAGEMENT CONSULTANT
  - 80435 PERSONNEL SERVICES - TEMPORARY
  - 80440 PUBLISHING/EDITING/GRAPHIC DESIGN
  - 80445 REALTOR/REAL ESTATE APPRAISER
  - 80450 RECRUITERS
  - 80455 SECURITY SERVICES - WATCH/GUARD/PATROL
  - 80460 OHS SAFETY MANAGER
  - 80465 TRAINING SERVICES (SUPPORT)
  - 80470 TRAVEL/TRAVEL AGENT
  - 80475 CONSULTANT-OTHER
  - GENERAL CONTRACTORS
  - 80480 GEN. CONTR. - HISTORICAL RESTORATION
  - 80485 GEN. CONTR. - LINE PRODUCTS
  - 80490 GEN. CONTR. - EXTERIOR MODIFICATIONS
  - 80495 GEN. CONTR. - INTERIOR MODIFICATIONS
- 8-2008