



**SIMPLIFIED ANNUAL REPRESENTATIONS AND CERTIFICATIONS  
&  
ENTITY INFORMATION FORM**

<b>Please complete all sections below.</b>	
Entity Legal Business Name	
'Doing Business As' (dba) Name <i>(if applicable, should match W-9)</i>	
Business Street Address	
City	State
Zip	Country
Main Phone #	Main Fax #
Entity Program Point of Contact Information (Name, Title, Phone, Email)	
Entity Contractual/Business Point of Contact Information (Name, Title, Phone, Email)	
<b>Complete the following items, enter "none" where appropriate (i.e. DUNS, Website):</b>	
Year Established	Number of Employees
Annual Gross Revenue	
Website URL	
Unique Entity Identifier Number (or DUNS if entity does not have an assigned UEI)	
NAICS Code(s), <i>these may be found on this website:</i> <a href="http://www.naics.com/search.htm">http://www.naics.com/search.htm</a> <i>(enter all applicable)</i>	

If you are registered in the System for Award Management (SAM) as a prime contractor, formerly the Central Contractor Registration, and have a current Reps & Certs (formerly ORCA), please also check below, and proceed to sign and date this form.

The Offeror certifies that it has completed the annual Reps & Certs electronically via the SAM website at <https://www.sam.gov/portal/public/SAM/>. The Offeror verifies by submission of this document that the Reps & Certs currently posted electronically have been entered or updated in the last 12 months, are current, accurate, and complete.

**SMALL BUSINESS PROGRAM REPRESENTATIONS (FAR 52.219-1, Sep 2021).**

The Offeror's Small Business Size Standard is \_\_\_\_\_

The Table of Small Business Size Standards can be found here: <http://www.sba.gov/content/table-small-business-size-standards>

**Offeror represents that it** (check only the applicable size):

- is a large business
- is a small business

**Answer the Following only if classified as a Small Business above** (check all that apply):

- is a small disadvantaged business (sdb)
- is a women-owned small business (wosb)
- is a veteran-owned small business (vosb)
- is a service disabled veteran-owned small business (sdvosb)(must be certified by the VA)
- is a HUBZone small business (as certified by the SBA)
- is a HUBZone joint venture

**Answer the following only if classified as Woman-Owned Small Business (WOSB) above** (check all that apply):

- is a WOSB concern eligible under the WOSB Program (as certified by the SBA)
- is a WOSB joint venture (as certified by the SBA)

**Answer the following only if classified as WOSB eligible under the WOSB Program above** (check all that apply):

- is an economically disadvantaged women-owned small business concern (EDWOSB) (as certified by the SBA)
- is an EDWOSB joint venture (as certified by the SBA)

**SMALL BUSINESS PROGRAM REPRESENTATIONS Continued (FAR 52.219-1 Alt I).**

**Check the category in which ownership falls if classified as a disadvantaged small business above:**

- Black American.
- Hispanic American.
- Native American (American Indians, Eskimos, Aleuts, or Native Hawaiians).
- Asian-Pacific American (persons with origins from Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, Japan, China, Taiwan, Laos, Cambodia (Kampuchea), Vietnam, Korea, The Philippines, Republic of Palau, Republic of the Marshall Islands, Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, Guam, Samoa, Macao, Hong Kong, Fiji, Tonga, Kiribati, Tuvalu, or Nauru).
- Subcontinent Asian (Asian-Indian) American (persons with origins from India, Pakistan, Bangladesh, Sri Lanka, Bhutan, the Maldives Islands, or Nepal).
- Individual/concern, other than one of the preceding (as certified by the SBA).

**TYPE OF BUSINESS ORGANIZATION:**

**Check the applicable box:**

- a C Corporation or  an S Corporation, under the laws of the State of
- a limited liability company
- an Individual (*Independent Contractor/Consultant*)
- a Sole Proprietorship
- a Partnership
- a Nonprofit Organization
- a Joint Venture
- an Educational Institution
- a Government Entity (Federal, State or Local)
- a Foreign Entity (*stop here and proceed to sign and date this form*)
- International organization per 26 CFR 1.6049-4
- Other

***The following Affirmative Action and Equal Opportunity items shall be completed if the supplier's work is estimated to be \$10,000 or greater (aggregate estimated value of all awards in any 12-month period) and funded by any U.S. Government agency at any tier, the Equal Opportunity clause FAR 52.222-26 may be applicable.***

**AFFIRMATIVE ACTION REPRESENTATIONS**

**FAR 52.222-25 (APR 1984)**

The Supplier represents that:

- (1) it  **is exempt** (*50 employees and/or less than \$50,000 in Government contracts during the prior twelve (12) month period*) **or**
- (2)(i) it  **has developed and has on file**,  **has not developed and does not have on file**, at each establishment, affirmative action programs required by the rules and regulations of the Secretary of Labor (41 CFR 60-1 and 60-2) **or**
- (ii) it  **has not previously had contracts/subcontracts subject to the written affirmative action programs** requirement of the rules and regulations of the Secretary of Labor.

**EQUAL OPPORTUNITY REPRESENTATIONS**

**FAR 52.222-22 (FEB 1999)**

The Supplier represents that:

- (a) it  **is exempt** (*less than 50 employees*) **or**
- (b) (1) it  **has**,  **has not participated** in a previous contract or subcontract subject the Equal Opportunity Clause 52.222-26; and
- (2) it  **has**,  **has not filed all required compliance reports.**

*If the representation indicates required reports have not been filed, supplier must submit said reports before delivering products or providing services under federal awards.*

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**SIGNATURE PAGE**

**By signing below, the Supplier certifies that the information and representations provided on this form are accurate, current, and complete.**

Name and Title
Signature
Date