



Pawnee Nation Tribal Employment Rights Office Indian-Owned Business Certification Application



Incomplete applications cannot be submitted. All applications may be subject to a site visit. As of September 1, 2019, all applications will be required to pay a \$100 non-refundable application processing fee. If the business is certified, the year one certification fee will be waived.

Per Pawnee Nation of Oklahoma Law (Ordinance) No. 95-49; Pawnee Nation Tribal Employment Rights Act, to be certified as an “Indian-Owned Firm” by the Pawnee Nation TERO Office, your business must meet these definitions:

Section 03. (k) “Indian”/“Native American” means any member of a federally recognized Indian tribe.

Section 03. (l) “Indian owned firm or entity” means any commercial, industrial, or other business, which is owned by an Indian or Indians, or other Indian owned firm or entity, provided that such Indian ownership constitutes not less than fifty-one percent (51%) of the enterprise.

1. FIRM IDENTIFICATION

Date of Application _____

Federal Identification/Social Security No. _____

Name of Business

Mailing Address City State Zip

Type of Business: _____ Single Proprietor _____ Corporation _____ LLC _____ Partnership

Percent of Indian Ownership: _____ (Must be 51% or more)

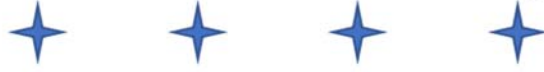
Contact Name Business Phone

Email Business Fax

Year Business was Established: _____ No. of Employees _____ No. of Native Americans: _____



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2. CAPITAL & EQUIPMENT

- A. *Capital:* Identify amount and source of original and present capital (i.e., contributed by owner, bank loan, or other type of loan). If loan, indicate names(s) of those legally bound to repay.
- B. *Equipment:* List all equipment pertaining to day-to-day operations and business.

Quantity	Description	Price (Book Value)	How Obtained (Purchased, Donated, etc.)



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Documentation Requirements

I. Management

1. Provide for each owner of more than 5% interest, all senior management personnel and members of the Board of Director the following:
 - A. Name
 - B. Address
 - C. Social Security Number
 - D. If Indian, Tribal Affiliation and Enrollment Number
 - E. Percentage of ownership
2. Present position (description of all duties)
3. Previous business experience
4. Previous work experience in areas in which firm intends to engage
5. Education and Training
6. Other jobs presently held
7. Control of Company:
 - A. Identify name
 - B. Race
 - C. Title in 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:
 - a. Financial decisions
 - b. Management decisions, such as:
 - Marketing & Sales
 - Hiring & Firing
 - Purchase of major equipment & supplies
 - Supervision of field personnel
8. Describe or attach any stock options or other ownership options that are outstanding, and any agreements between owners & third parties, which restrict ownership or control of Indian owners.
9. A sworn statement of the proper officer indicating:
 - A. The total number of share 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.
10. Of the stock sold, how much remains unpaid and subject to assessment?



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Documentation Requirements

II. Ownership

1. Provide for each Owner:
 - A. Name
 - B. Address
 - C. Tribal Affiliation
 - D. Enrollment Number
 - E. Percent of Ownership
 - F. Amount of Investment
 - G. Method of Investment
 - Cash
 - Equipment
2. Loan information or promissory note indicating who the loan is from.
3. Percent of voting control and position in the firm.
4. Name of all other firms in which the owner holds or has within the past year an ownership interest (other than publicly held corporations and similar ownerships solely for investment) or a management position.
5. List any management fee, equipment rental, bonuses or other arrangements that will provide payment to non-Indian owners beyond their share of profits and salaries, as indicated above.
6. Identify any owner or management official of the named company who is or has been an employee of another company that has an ownership interest in or a present business relationship with said company; present business relationships include shared space, equipment, financing, or employees as well as both companies having some of the same owners.
7. Indicate if this company or other companies with any of the same officers have previously received or been denied certification or participation as an Indian preference firm and describe the circumstances. Indicate the name of the certifying authority and the date of such certification or denial.



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Certification

I do solemnly declare and affirm that the contents of the foregoing documents are true and correct and include all information necessary to identify and explain the operation of _____ (Name of Business), as well as the ownership thereof. The undersigned in addition swears that this business is at least 51% owned by one or more members of a federally recognized Tribe whose management and daily business operation are controlled by one or more such individuals.

Any material misrepresentation will be grounds for denial or revocation or certification by members of the Pawnee Nation TERO. By executing this certification I hereby submit to the jurisdiction of the Pawnee Nation Tribal Court.

Signature of Authorized Official

Date

Print or Type Name

Title