



Tribal Employment Rights Office (TERO)

P.O. Box 1498, Wewoka, Oklahoma, 74884

Telephone: 405-303-2476

Fax: 405-303-22424

wind.m@sno-nsn.gov

Please submit a \$25.00 processing fee with Application to be completed ,
and application must be Typewritten or Printed in Black or Dark ink

Application must include a copy of the following:

1. Driver's license
2. Certificate of Degree of Indian Blood Card (CDIB)
3. Tribal Membership Card
(Membership based on other than verified descent by blood will require adequate documentation Indian heritage).
4. Federal Identification Number
5. Partnership: 1. Agreement, 2. Amendments
 - a. Corporation: 1. Certificate of Incorporation, 2. Articles of Incorporation
3. Bylaws 4. Amendments
6. Equipment List
7. Financial Sheet
8. List of officers and number of shares
9. Sworn statement of proper office that state:
 1. Total number of share,
 2. Stock sold,
 3. Amount of Cash
 4. Total indebtedness
10. Bonding letter
11. Other Minority Certifications
12. Three (3) canceled checks for accounts payable and one (1) weeks payroll.
13. All information submitted pertaining to the corporation and shareholders shall be signed by the corporation president to the corporate secretary and shall bear the corporation seal.
14. Incomplete applications will be returned and will result in a delay of the application process. Every question must be answered. If question does not apply, please put N/A in bank.

Please forward application to:

Seminole Nation of Oklahoma
Tribal Employment Rights Office (TERO)
P.O. Box 1498
Wewoka, Ok 74884

Business Certification Application

Business Name: _____

Business Address: _____

Mailing Address: _____

City, State & Zip: _____, _____, _____

Phone Number: _____/_____, Home Number: _____/_____

Tax ID'S Number: _____

1. Check one: Corporation _____ Partnership _____ Individual _____

2. Check one: Indian owned _____ Non-Indian owned _____
(Indian Owned: an Indian has 51% of the controlling vote and interest of the business)

3. How many years in the business? _____

4. Do you have employees? _____, If yes, how many _____, How many are Indian? _____

5. Insurance: Workman's Comp. _____, Auto _____, Liability _____, Comprehensive _____

6. List reference: (Jobs Completed the last 12 months)

Name: _____, Address: _____

City: _____, State: _____, Zip: _____, Phone #: _____/_____

Type of Work done: _____

Name: _____, Address: _____

City: _____, State: _____, Zip: _____, Phone #: _____/_____

Type of Work done: _____

7. Have there been any changes in partnership since you have been in business?

a. _____ If so, how many times? _____

b. Were these partners Indian? _____ Non-Indian? _____

8. Have you ever worked on a HUD Project or Federal Funded Project before? _____

If yes, answer when, where, and what type of project? _____

9. Please explain all areas of expertise that apply to your business:

10. If in the past, you had applied for certification as an Indian Preference Firm and had received a Probationary letter, and have there been any changes in the status of your business?

I _____, have completed this application and I hereby attest everything I have answered is true to the best of my knowledge

Signature of Owner

Title

Please make checks or money orders payable to:

Seminole Nation of Oklahoma TERO
P.O. Box 1498
Wewoka, OK 74884

Requirements:

For TERO Office only:

Date received _____, all documents included: _____,