



# OFFICE OF SUPPLIER DIVERSITY

**Policy, Eligibility, Application, and Affidavit regarding  
Certification as **Diverse Business (MBE, WBE, VOB, SDVOB, IWDBE)**  
and **Small Business (SBF)** Enterprises.**

**Office of Supplier Diversity (OSD)**

**State of Delaware**

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**State of Delaware Office of Supplier Diversity**  
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**for Diverse Businesses (MBE, WBE, VOB, SDVOB, & IWDBE) and Small Businesses (SBF)**

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**State of Delaware Office of Supplier Diversity**  
**POLICY**  
**for Diverse Businesses (MBE, WBE, VOB, SDVOB, & IWDBE) and Small Businesses (SBF)**

<b>Policy Name:</b>	Policy for Diverse and Small Business Certification
<b>Date Issued:</b>	Pre-2013, revised 2014
<b>Date Revised:</b>	July 13, 2017 -Effective Date August 30, 2017
<b>Policy Owner:</b>	Executive Director, OSD

**POLICY STATEMENT:**

The mission of the Office of Supplier Diversity (OSD) is to assist the entire supplier diversity community of Minority, Women, Veteran, Service Disabled Veteran, and Individuals with DisAbilities owned businesses as well as Small businesses of a unique size in competing for the provision of commodities, services, and construction to State departments, agencies, authorities, school districts, higher education institutions and all businesses.

Steps to accomplish our mission include:

- Certifying diverse and uniquely sized small businesses enterprises;
- Creating and supporting an online [Directory of Certified Businesses](#) , diverse and small, and also in [Open Data](#);
- Increasing knowledge of and access to opportunities for diverse and small businesses to participate in state procurement;
- Encourage Supplier Diversity Plans to include utilization of the Directory when making under threshold procurements; and
- Measuring, analyzing, and reporting on spend for current and future procurements with diverse and uniquely sized small businesses.

**PURPOSE:**

The purpose of this policy is to establish guidelines and expectations for eligibility for certification as a diverse or small business.

**EFFECTIVE DATE:**

OSD will accept the currently used application formats until the effective date of August 30, 2017, after which on the attached application will be accepted.

**GENERAL GUIDELINES FOR ELIGIBILITY:**

Generally, certification is met when applicant(s) own and control a minimum of 51% of the firm, including the daily operation of the business for which customers pay the firm. Control may not be demonstrated if it is by others who are not the 51% owners, or if the 51% owners do not hold independent knowledge and ability, which may include licensure, to perform the operations for which customers pay the firm. The control must rest with the owners applying for certification. If owners perform only or primarily administrative tasks, which are not services offered to clients, or if owners do not hold current requisite Delaware licenses or certifications for services provided to customers, then control may not be met.

The general guidelines regarding eligibility are provided below.

All Business Applicants:

- a. A for profit business with “useful business function(s).”
- b. Ownership must be held by U.S. Citizen(s) or Permanent Resident(s).

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c. Meet the specific eligibility requirements of the certification being applied for.

Diverse Business Applicants - Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility owned business (sole-proprietorship, partnership, corporation or joint venture) must meet general guidelines for all business at items a, b, and c above, as well as the following criteria:

d. Minority groups include: African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, and Subcontinent Asian Americans, and

e. At least 51 percent owned, controlled, and actively managed by: minorities, women, veterans, service disabled veterans, and/or individuals with DisAbility.

Small Business Applicants – a Small Business must meet general guidelines for all business at items a, b, and c above, as well as the following criteria:

f. Be within one of the six industry sectors and at or under the eligibility size caps identified in the chart below; and

g. Operate free from the control of a business larger than the eligibility size caps identified below.

Small Business Certification Industries	NAICS <sup>1</sup> sectors* (initial code numbers)	Small business eligibility and graduation point size caps	
		FTE (full time equivalents)	Gross sales
		Based upon a 3 year average	
Architecture & Engineering Services	541	none	< \$3,500,000
	237		
Construction	23	< 250	< \$7,000,000
Manufacturing	31	< 250	none
	32		
	33		
Retail	42	< 25	< \$3,500,000
	44		
	45		
Service	various	< 50	< \$3,500,000
Wholesale	42	< 50	none

The size cap is both an eligibility guideline and a graduation point. The size eligibility criteria are based upon one or all of the following three year averages: (1) gross sales, (2) number of full-time equivalents (employees), or (3) both (if both categories have a cap then either/both apply). The Small Business Focus Program is for business enterprises that are 50% of the SBA<sup>2</sup> and Delaware DOT DBE size caps for the smallest size cap within each industry sector. Those numbers are identified in the chart above.

<sup>1</sup> North American Industry Classification System (NAICS) is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. A NAICS code has 6 digits. The first 2 to 3 digits are used to identify the industry for the Small Business Focus Program. You can review NAICS at: <http://www.census.gov/eos/www/naics/>

<sup>2</sup> You can find the SBA size cap information located at: <http://www.sba.gov/content/table-small-business-size-standards>. It is available in PDF or excel formats.

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**SPECIFIC GUIDELINES FOR ELIGIBILITY:**

**CERTIFICATION APPLICATION**

**ELIGIBILITY AS A DIVERSE BUSINESS:**

**Information and Definitions**

**Certification Application as a Diverse Business:**

Contained within these materials is the application for Minority, Women, Veteran, Service Disabled Veteran, and Individual(s) with DisAbility Business Enterprise certification with the State of Delaware. All appropriate questions must be answered. Please type or print clearly.

**Definitions**

**Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility Owned Business Enterprise**

Is a business that is at least 51 percent owned, controlled and actively managed by Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility group members who are United States citizens or persons lawfully admitted to the United States for permanent residence. The business must be a for-profit business and currently be performing a Useful Business Function.

**Minorities:** United States citizens or permanent residents who are African (Black) Americans, Asian/Asian-Pacific Americans, Hispanic Americans, Native Americans, Subcontinent Asian Americans, or as defined herein:

**African (Black) Americans:** All persons having origins from any of the Black groups of Africa and all persons having origins in any of the original peoples of the Cape Verde Islands;

**Asian/Asian-Pacific Americans:** All persons having origins from any of the original peoples of the Far- East, Asia, or the Pacific Islands, including China, Japan, Korea, Samoa, Philippine Islands, and Hawaii, Guam, U.S. Trust Territories of the Pacific or the Northern Marinas;

**Hispanic Americans:** Persons having origins from any of the Spanish-speaking people of México, Puerto Rico, Cuba, Central or South America, or the Caribbean Islands;

**Native Americans:** All persons having origins from the original peoples of North America and who are recognized as Native Americans by a tribe or tribal organization which is recognized as eligible for the special programs and services provided by the United States to Indians/Native American because of their status as Indians/Native American, and/or is recognized by the State of Delaware; and/or

**Subcontinent Asian Americans:** All persons whose ancestors originated in India, Pakistan or Bangladesh.

**Veteran:** An individual who has served in the United States military or has served in the National Guard of the United States for six months and has received a discharge other than a dishonorable discharge.

**Service Disabled Veteran:** An individual meeting the above criteria for Veteran, who is verified through VetBiz.gov or the Veteran Administration as a Service Disabled Veteran.

**Individual with DisAbility:** standing is verified by a certificate or letter from a government office that: certifies an individual as such, or by the Social Security Administration, or a Doctor letter identifying the fact of a disability and the expected duration of same (see the materials identified on page 13).

**Certification** - A determination by the OSD that a for-profit business entity is a Minority Business Enterprise (MBE), Women Business Enterprise (WBE), Veteran Business Enterprise (VOBE), Service Disabled Veteran Owned Business Enterprise (SDVOBE), and/or an Individual with DisAbility Business Enterprise (IWDBE). Certifications expire after three years.

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##### **Ownership**

The Minority, Women, Veteran, Service Disabled Veteran, and Individual(s) with DisAbility Business Enterprise ownership interest in the firm must be real, substantial and continuing and shall go beyond the pro forma ownership of the business as reflected in its ownership documents. The diverse owners shall enjoy the customary incidents of ownership and shall share in the risks and profits commensurate with their ownership interest as demonstrated both by an examination of the substance and form of arrangements. Ownership is based upon 51% or more ownership of the company inclusive of all classes of stock or ownership criteria.

##### **Control**

Control will be exemplified by possession of the requisite knowledge and expertise to run the particular business. Control includes the authority to determine the direction of a business, including but not limited to capital investments and all other financial transactions; property acquisitions; day-to-day decisions; contract negotiations; legal matters; selection and hiring of officers, directors, and employees; operating responsibility; cost-control; income and dividend matters; and the rights of other shareholders or partners.

The diverse owner(s) must hold the highest officer position in their company, example: Chief Executive Officer or President. If more than one owner constitutes 51% then all shall hold the highest officer positions, except it is not expected that all are the same office.

The diverse owner(s) must demonstrate that they possess the experience, expertise and knowledge to operate their particular type(s) of business.

Expertise limited to office management, administration, or bookkeeping functions unrelated to the principal business activities of the company is insufficient to demonstrate control. Diverse owners must also verify that they

hold any licenses or certifications required by the type of business in which they are engaged.

**Minority Business Enterprise (MBE)** - A for profit business in which at least 51% of the beneficial ownership interest and control are held by a minority or minorities. In the case of a corporation, minorities must hold at least 51% of voting interest.

**Women Business Enterprise (WBE)** - A for-profit business in which at least 51% of beneficial interest and control is held by women. In the case of a corporation, women must also hold at least 51% of the voting interest.

**Veteran Owned Business Enterprise (VOBE)** – A for-profit business in which at least 51% of beneficial interest and control is held by veterans. In the case of a corporation, veterans must also hold at least 51% of the voting interest.

**Service Disabled Veteran Owned Business Enterprise (SDVOBE)** – A for-profit business in which at least 51% of beneficial interest and control is held by serviced disabled veterans. In the case of a corporation, service disabled veterans must also hold at least 51% of the voting interest.

**Individual with DisAbility Owned Business Enterprise (IWDBE)** - A for-profit business which at least 51% of beneficial interest and control is held by individual(s) with disAbilities. In the case of a corporation, individuals with disAbilities must also hold at least 51% of the voting interest.

##### **Useful Business Function**

A useful business function is one, which results in the provision of materials, supplies, equipment or services to consumers in the State. A business acting as a conduit to transfer funds to a non-diverse business does not constitute a useful business function unless doing so is a normal industry practice.

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##### Benefits of Certification

Current certified Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility owned firms are eligible to be listed in the State of Delaware online Directory of Certified Businesses, which is hosted on the Office of Supplier Diversity webpage and is available to government and public.

##### Recertification

Recertification is not automatic and is not guaranteed. Sixty days prior to expiration of the original certification date, firms must submit the recertification application and affidavit to remain certified and actively visible in the State of Delaware's Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility Owned Business Enterprise database and online Directory. Businesses must continue to meet eligibility for certification in order to become recertified. Substantial changes in a previously certified business may change eligibility. Failure to submit a recertification application will cause the company to be removed from the online Directory as an expired certification. A company whose certification has expired for more than 60 days, is invited to submit a new application for certification, the recertification option will have tolled.

##### Eligibility

A Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility Owned Business Enterprise (sole-proprietorship, partnership, corporation, LLC, or joint venture) must meet the following criteria:

- a) At least 51 percent owned, controlled and actively managed by Minority group members (as defined on pages 5 and 6), Women, Veterans, Service Disabled Veterans, and/or Individuals with DisAbilities, all of whom are U.S. Citizens or permanent residents;
- b) Demonstrate ownership and control (as defined on pages 5, 6 and 7); and

- c) Serve a for-profit business with "useful business functions." (as defined on pages 8 and 9),

**Reasons for denial** (please note reasons for denial may include but are not limited to the below)

- a) A business located in a state other than Delaware must first obtain state-level certification in its home state, if such certification is available. "Home state" is defined as the state where the company's headquarters are located.
- b) Securities, which constitute 51% ownership and control of a company for the purpose of establishing it as an eligible firm, must be held directly by Minorities, Women, Veterans, Service Disabled Veterans, and/or Individuals with DisAbility. No securities held in trust, or by a guardian for a minor, shall be considered as held by a Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility in determining the ownership or control of the business enterprise unless the applicant individual is the sole trustee and sole beneficiary of said trust.
- c) If the business operations do not reflect the ownership shown on paper.
- d) Firm is not a for-profit business.
- e) Firm has provided false or misleading information
- f) Control will not be deemed to exist in cases of simple majority or absentee ownership, or when a non-minority/non-female/non-veteran/ non-service disabled veteran/non-individual with DisAbility owner or employee of the firm is disproportionately responsible for its operation.
- g) The firm shall not be subject to any formal or informal restrictions, for example through: by-laws provisions, partnership agreements, or charter requirements for cumulative voting rights or otherwise that prevents the diverse owners, without the cooperation or vote of any owner who is

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- not a diverse owner, from making a business decision of the firm.
- h) If the owners of the firm who are not Minority, Women, Veteran, Service Disabled Veteran, and/or Individual with DisAbility are disproportionately responsible for the operation of the firm, then the firm is not controlled by and shall not be considered as eligible within the meaning of the definition. Where the actual management of the firm is contracted out to individuals other than the owner, those persons who have the ultimate power to hire and fire the managers, can, for the purpose of this definition be considered as controlling the business.
- i) The certification application was submitted incomplete.
- j) The applicant abandoned the application and was non-responsive to OSD.
- the national corporate minority certifying entity National Minority Supplier Development Council ([NMSDC](#)),
  - the national corporate women certifying entity Women Business Enterprise National Council ([WBENC](#)),
  - and/or City of Wilmington, DE.
- You must attach a copy of the other current certification and submit all documents to the OSD; if certificates are not issued by your certifying entity then you must provide OSD with the URL link for the location of your company's certification in the online listing of the certifying entity.

## OUT OF STATE APPLICANTS

An out-of-state company must first **be certified in its home state** before it can be considered for certification in Delaware. This must be a state-level certification, if available. Home state is not restricted to nor only the state of business formation, rather it is the location of the company's headquarters or primary office.

### If your business is certified by another certifier?

You may be eligible to respond to a subsection of the application questions.

Included certifiers:

- Delaware Department of Transportation (DelDOT),
- Maryland Department of Transportation (MDOT),
- Pennsylvania Department of Transportation (PAUCP),
- the federal Center for Veterans Enterprise ([VetBiz.gov](#)),

## CERTIFICATION APPLICATION ELIGIBILITY AS A SMALL BUSINESS:

### Information and Definitions

#### Ownership

The Small Business Focus (SBF) certification is based upon the size of a business entity rather than who the owners are however, businesses cannot be majority owned or controlled by one or more business entities that are larger than the eligibility size of the SBF Certification size standards.

#### Control

Businesses in the SBF Program cannot be controlled by a majority nor non-majority owner that is larger than the eligibility size of the SBF Program.

The company may be asked to verify that the owners/company holds any licenses or certifications required in Delaware for the type of business in which they are engaged.

#### Useful Business Function

A useful business function is one, which results in the provision of materials, supplies, equipment or services to consumers in the State. A business acting as a conduit to transfer funds to one or



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more business entities that are larger than the eligibility size of the SBF Program does not constitute a useful business function unless doing so is a normal industry practice.

**Reasons for denial** (*please note denial may include but not be limited to the below*)

- a) If the majority owner(s) of the firm is one or more business entities that are larger than the eligibility size of the SBF Certification size standards.
- b) All/any securities, which constitute majority ownership and/or control of a company or firm for the purpose of establishing it as an eligible firm, must not be held by one or more business entities that are larger than the eligibility size of the SBF Certification size standards.
- c) If the business operations do not reflect the ownership shown on paper.
- d) Firm is not a for-profit business.
- e) Firm has provided false or misleading information.
- f) Control will not be deemed to exist in cases of simple majority, absentee ownership, or when a non-majority owner is disproportionately responsible for its operation.
- g) The firm shall not be subject to any formal or informal restrictions through, for example: by-law provisions, partnership agreements, or charter requirements for cumulative voting rights or otherwise, that prevents the majority owners, without the

cooperation or vote of any non-majority owner including but not limited to one or more business entities that are larger than the eligibility size of the SBF Certification size standards, from making a business decision for the firm.

- h) The certification application was submitted incomplete.
- i) The applicant abandoned the application and was non-responsive to OSD.

#### **Benefits of Certification**

Current certified Small Businesses are eligible to be listed in the State of Delaware online Directory of Certified Businesses, which is hosted on the Office of Supplier Diversity webpage and is available to government and public.

#### **Recertification**

Recertification is not automatic and is not guaranteed. Sixty days prior to expiration of the original certification date, firms must submit the recertification application affidavit to remain certified and actively visible in the State of Delaware's database and online Directory. Businesses must continue to meet eligibility for certification in order to become recertified. Substantial changes in a previously certified business may change eligibility. Failure to submit a recertification application will cause the company to be removed from the online Directory as an expired certification. A company whose certification has expired for more than 60 days, is invited to submit a new application for certification, the recertification option will have tolled.

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**Frequently Asked Questions**

**Q:** Does certification cost money?

**A:** No, there is no fee for processing your application.

**Q:** How long does it take to receive a determination about my company's application for certification?

**A:** Generally four to six weeks, provided the applicant is responsive to requests from OSD. Applications may be terminated for non-responsiveness, after which a new application may be submitted.

**Q:** Are there any goals or preferences for Certified Businesses?

**A:** Outside of [DBE subcontracting participation](#) goals on certain Department of Transportation contracts, where federal highway dollars are involved and where certified trades are utilized. Those goals are set project by project. Delaware's Disadvantaged Business Enterprise (DBE) certification program and opportunities are handled through the Department of Transportation (DelDOT). DBE is a different certification than the state certification of the Office of Supplier Diversity (MBE, WBE, VOB, SDVOB, and IWDBE), as it is used specifically for Transportation work. There is not a requirement to be certified by the Delaware Office of Supplier Diversity or the Department of Transportation in order to do business with the state. We have an open, equal, and inclusive procurement process and do business with the full spectrum of business including traditional, diverse, and small. The value of certification is the inclusion of your business in the OSD online [Directory of Certified Businesses](#). This directory is used for business-to-government under-threshold, unadvertised opportunities. The directory is also used by others for business-to-business opportunities.

**Q:** Does my certification expire?

**A:** Yes. Both Diverse and Small Business Certifications expire at the end of three years.

**Q:** Will I be notified of all procurement opportunities?

**A:** No. You are strongly encouraged to visit the respective resources including but not limited to: [bids.delaware.gov](http://bids.delaware.gov). To ensure that you are made aware of any advertised contracting opportunities that match your business, you are encouraged to sign up for our free Vendor Notification Service. Once properly registered, if a bid is posted that matches your criteria, you will receive automatic electronic notification that an opportunity has been posted. Access is at: <https://de.blackboardconnect.com/>, use the step-by-step guide: [https://dti.delaware.gov/or/BBC5/BBConnect5\\_Subscriber\\_Reference.pdf](https://dti.delaware.gov/or/BBC5/BBConnect5_Subscriber_Reference.pdf). Additionally, GSS also uses the directory of certified business to outreach for procurement opportunities.

**Q:** What is the best way to communicate with the OSD?

**A:** Email.

**Q:** Is it advisable to register my business with any other agency?

**A:** There are multiple agencies that have their own bidders list. Please check the website of each agency or <http://mymarketplace.delaware.gov/>. For example, Government Support Services (GSS), the Division of Facilities Management (DFM), and the Department of Technology and Information (DTI) have vendor registration processes. The Delaware Department of Transportation (DelDOT) has its own Disadvantaged Business Enterprise (DBE) certification as well as a pre-qualification list for vendors.

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**Q:** Does certification mean I have a contract with the State of Delaware?

**A:** No.

**Q:** Could I possibly be eligible for more than one certification from the Office of Supplier Diversity?

**A:** Yes. Review the application and apply for any diverse and small business certification for which you find yourself eligible. OSD may also suggest additional certification categories.

**Q:** Does OSD communicate with me to help me with access to opportunities?

**A:** Yes. OSD provides inclusive communication with all businesses: traditional, diverse, and small, through a list serve and social media. You may check the OSD website at: <http://gss.omb.delaware.gov/osd/index.shtml> to connect to the communication resources, view the Newsroom, review Quarterly and Annual reporting, review Meeting Minutes for the Governor’s Supplier Diversity Council, and more. The list serve link is: <http://directory.osd.gss.omb.delaware.gov/self-registration.shtml>, OSD provides notice of various business networking, development, and other events throughout the state and region. Each email subject line will start with “OSD is Sharing: \_\_\_\_\_”

**Q:** If I have questions about the application or my eligibility how can I get help?

**A:** OSD offers regularly scheduled workshops for anyone wanting to ask questions or get help on completing the applications. The OSD website includes a Newsroom page, access that page to learn about these workshops. <http://gss.omb.delaware.gov/osd/reports.shtml>

**Q:** Will OSD help me with access to Business-to-Business opportunities and in working on my business?

**A:** No. OSD assists with certification and many Business-to-Government opportunities. However, OSD is a resource partner with other state offices and outside partners. OSD is happy to refer you to our partners so that you can work with the best partner for your business needs. Those partners include the Division of Small Business, Development and Tourism within the Delaware Department of State (DOS), the corporate and international development team at Global Delaware, the Small Business Ombudsman within the state Department of Natural Resources and Environmental Control (DNREC), and others. To reach out to other partners on your own, review our list of Resource Partners on the OSD website. The website includes a Newsroom page, access that page to learn about our resource partners. <http://gss.omb.delaware.gov/osd/reports.shtml>.

**Q:** If my certification application is Denied, what happens?

**A:** Denials will be provided in writing, inclusive of the reasons for denial. The denial letter will include the protest process details.

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**Application Document Request checklist**

Unless otherwise indicated, copies of documents are sufficient. Any deficiency may delay the certification process. Certification generally takes four to six weeks. An on-site visit may be requested and scheduled by OSD once the completed application and appropriate supporting documentation are received.

Applicant	Documents to attach to your application	Sole Prop	Part/LLP	Corp/S-Corp	LLC
All	Completed application, identifying all owners constituting 51% ownership and control.	Yes	Yes	Yes	Yes
All	Current Notarized "Certification Application Affidavit", one each for all constituting 51% ownership and control.	Yes	Yes	Yes	Yes
All	Relevant Professional or Trade Licenses, Certificates, documents of training, and degrees held by the 51% owner(s), or by the company based upon the 51% owner(s)' status for such license or certificate. (i.e. Electrician, HVAC, Engineer, Medical Profession, Attorney, Hairdresser License, etc.).	Yes	Yes	Yes	Yes
All	Current State of Delaware Business License (required for all Delaware based businesses and for out-of-state businesses currently performing work in Delaware). (see the Division of Revenue, Licensing and Registration website with questions at: <a href="http://revenue.delaware.gov/services/Business_Tax/Step3.shtml">http://revenue.delaware.gov/services/Business_Tax/Step3.shtml</a> )	Yes	Yes	Yes	Yes
Out of state diverse applicants	If from out-of-state, copy of other applicable certification from home state (home state is the location of the company headquarters, not the state of formation) (must be a state level certification, if available). OSD will accept NMSDC and/or WBENC and/or VetBiz.gov in lieu of home state.	Yes	Yes	Yes	Yes
All new applicants  If certified elsewhere, only if requested.	Governance Documents:		Yes	Yes	Yes
	Partnership Agreement, including any amendments, buy-out rights, and profit sharing arrangements		Yes		
	Articles of Incorporation with all amendments			Yes	
	Minutes of the last annual shareholders meeting			Yes	
	Minutes of the last Board of Directors meeting			Yes	
	By-laws and all By-law Amendments			Yes	
	Copy of most recent Stock Ledger			Yes	
	Copy of Operating Agreement, with list of members, ownership amount of each member, and capitalization				Yes
	Franchise Agreement(s), if any	Yes	Yes	Yes	Yes
<b>SBF only</b>	<b>Seeking Small Business certification – provide the first page of the past three (3) years of your firm's tax returns (gross receipts) (1120, Schedule C of 1040).</b>	Yes	Yes	Yes	Yes
<b>Diverse</b>	<b>Other documents as identified on page 13, or as may be requested by OSD.</b>	<b>Only if requested</b>			

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**Additional documents may be requested of Diverse or Small Business Applicants:**

In addition to the universal application materials identified as required within this application as well as the Affidavit, which all diverse and/or small business applicants will provide, OSD may also seek from each 51% owner a copy of materials to document U.S. Citizenship, permanent residency, ethnicity, gender, veteran status, and DisAbility status. Below is a non-exhaustive list of possible additional materials that may be requested. In addition to the list below, if OSD requests of a vendor to provide supporting documents, such vendor may elect to provide the requested documents and any other documentation for review by OSD for consideration to support the individual's standing; such other documentation may or may not be determined to suffice. **Applicants are instructed to not provide any of the below unless specifically requested by OSD**

U.S. Citizenship or Permanent Residency:

- U.S. birth certificates, U.S. permanent resident card, U.S. passport, U.S. tribal membership card

Ethnic Minorities:

- Documents of ethnicity may include the birth certificate of the applicant, U.S. Passport identifying foreign place of origin, and/or tribal registry card.
  - If applicant's birth certificate does not identify ethnicity then also provide the birth and/or death certificates of applicant's parent(s) as named on applicant's birth certificate. If parent(s)'s documentation does not identify ethnicity, continue in parental lineage with birth or death certificates. If the document identifies 'colored' or any other mark that is not specifically naming an ethnicity, the applicant will inform OSD which ethnicities apply.
  - If Native American, please provide a current tribal membership card from a North American tribe or nation which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians, and/or is recognized by the State of Delaware.
  - Or other government issued documentation that demonstrates ethnicity to the satisfaction of OSD.

Gender:

- Women may provide birth certificates or current U.S. Passports identifying female gender.

Individuals with Disabilities: any one (1) of the following:

- A Certificate of Disability from the Delaware (or their home state's) Department of Labor, Division of Vocational rehabilitation, (The DisAbility itself need not be revealed); or
- A Certificate of Disability from the Delaware (or their home state's) Division of the Visually Impaired, (The DisAbility itself need not be revealed); or
- A letter from the U.S. Social Security Administration documenting that named individual is eligible to receive Social Security Disability Income. (the DisAbility itself and the dollar amount of the SSDI can be redacted); or
- A letter from a Medical Doctor (M.D.) documenting the person's name and the fact that they have a DisAbility and the duration of the DisAbility. (The DisAbility itself need not be revealed); or
- Any other documentation of disability for review by the Office of Supplier Diversity for consideration to support the individual's standing as an Individual with DisAbility; such other documentation may or may not be determined to suffice. The Office of Supplier Diversity may outreach to local and national resource partners to verify the example of any other documentation without sharing the actual documents.

Veterans and Service Disabled Veterans:

- The DD214 form for the applicant.
- If Service Disabled, then documentation from the Veterans Administration documenting the fact. (The DisAbility itself need not be revealed)

**State of Delaware Office of Supplier Diversity**  
**HOW TO APPLY**  
for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)

## HOW TO APPLY

- Complete all appropriate Application questions starting on the next page. **Incomplete applications will not be processed**
  - Diverse applicants complete Application items: 1 through 9, and 10 through 12
  - Small Business applicants complete Application items: 1 through 9, and 13
  - Optional Application items for all applicants: 14, 15, 16, & 17
- Provide the required documentation as identified on page 12.
- If requested by OSD, provide additional documentation as identified on page 13.
- If requested by OSD, provide access to business facilities and key personnel for an on-site visit. (OSD may outreach to request any materials believed to be missing and to schedule an on-site.)
- The Affidavit on page 24 must be signed and notarized by a U.S. Notary Public (most banks do this free). Faxed or emailed copies of the Affidavit will only be accepted if the notary seal has the stamped seal with the expiration date visible. Otherwise, mail the original Affidavit with the raised seal to our office.

**Questions that do not apply to your firm should be marked N/A in the space provided. Leaving a question blank will create delay in processing, as OSD will have to ask you to answer blank questions.**

## WHERE TO APPLY:

Please return the completed application with notarized signature and required documents.

Submit completed applications by mail, email, or fax:

Mail: Office of Supplier Diversity  
State of Delaware  
Government Support Services  
100 Enterprise Place, Suite 4  
Dover, Delaware 19904-8202

Email: [OSD@state.de.us](mailto:OSD@state.de.us)

Fax: 302.677.7086

**State of Delaware Office of Supplier Diversity**  
**APPLICATION**  
**for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)**

*All completed applications must be returned with the appropriate requested documents.*

**Please type or print clearly**

OSD use only: Application Date: \_\_\_\_\_

Mail, email, or fax application to:  
 Office of Supplier Diversity (OSD)  
 100 Enterprise Place, Suite 4, Dover, DE 19904-8202  
 Telephone: 302-857-4554 Fax: 302-677-7086  
 Email: [osd@state.de.us](mailto:osd@state.de.us)  
 Website: <http://gss.omb.delaware.gov/osd/>

If you have any questions regarding the completion of this application: OSD holds a workshop on the third Monday of every month from 9am to 10:30am for anyone wanting to ask questions or get help on completing the applications. The meeting location moves and includes OSD's Kent County office as well as other locations throughout the state and are shared monthly over the OSD List Serve, you may join at <http://directory.osd.gss.omb.delaware.gov/self-registration.shtml>

**Note – Section 1 must be completed in its entirety BY ALL APPLICANTS for the application to be processed. Incomplete applications will not be processed.**

<b>1. Business Name(s), Contact Information, Federal Employee Identification Number or Social Security Number (FEIN/SSN)</b>						
Legal Name of Firm:						
Doing Business As (If applicable):						
Federal E.IN or SSN:				E-Mail Address:		
Address line 1:						
Address line 2:						
City				State		Zip Code
Telephone Number:			Extension:	Fax Number:		
Company Web Site Address:						
Corp	<input type="checkbox"/>	S Corp	<input type="checkbox"/>	LLC*	<input type="checkbox"/>	Partnership LLP**
Sole Proprietor	<input type="checkbox"/>	Joint Venture	<input type="checkbox"/>			
Date firm was established?						
Date firm began doing business (date of first contract or sale)						

\* Limited Liability Corporation  
 \*\* Limited Liability Partnership

**State of Delaware Office of Supplier Diversity**

**APPLICATION**

**for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)**

**Note – Section 2 must be completed in its entirety BY ALL APPLICANTS for the application to be processed.**

**If your company has more than one person constituting the 51% ownership then each owner (up to 51%) must complete this question number 2 and each owner must execute the Affidavit on page 23. Incomplete applications will not be processed.**

<b>2. Primary owner(s) applicant information</b> (complete this section for each owner that constitutes the 51% total company ownership applying for certification – for either or both Diverse and Small Business Certification)			
Percentage of ownership:			
Name:			
Business Title(s):			
Home Address:			
City:	State:	Zip Code:	
Telephone Number:	Extension:	Fax Number:	
E-Mail Address:			
Date this owner acquired controlling interest?			
U.S. Citizen or Permanent Resident: No <input type="checkbox"/> Yes <input type="checkbox"/>			
Diversity Designation (select all that apply to this owner) : I am applying as:			
<input type="checkbox"/>	Small Business	<input type="checkbox"/>	Female
<input type="checkbox"/>	Black or African American	<input type="checkbox"/>	Veteran
<input type="checkbox"/>	Hispanic American	<input type="checkbox"/>	Service Disabled Veteran
<input type="checkbox"/>	Subcontinent Asian American	<input type="checkbox"/>	Individual with DisAbility
<input type="checkbox"/>	Asian or Asian-Pacific American	<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Native American	<input type="checkbox"/>	Other _____



**State of Delaware Office of Supplier Diversity**  
**APPLICATION**  
**for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)**

**Note – Section 3 must be completed in its entirety BY ALL APPLICANTS for the application to be processed.**

**3. Describe, in detail, what product(s) and/or services your business provides. Include a list of KEYWORDS that a buyer would search to find your goods or services. Please note the below capabilities narrative will be posted on the OSD web site. (use up to 2,500 characters including space and punctuation) Use a separate sheet if needed. (Providing a capabilities statement or brochure will not suffice.)**

**Note – Section 4 must be filled out in its entirety BY ALL APPLICANTS for the application to be processed.**

**4. Six digit North American Industry Classification System (NAICS) Code(s):**  
**(To assist you in determining your NAICS Code(s) go to [www.census.gov/naics](http://www.census.gov/naics) or call 1-888-756-2427)**  
 You are not limited to set number of NAICS codes, however they must apply to the goods and services or construction work currently offered and provided by the company for which the eligible owner(s) meet eligibility. Attach an additional page for more than 12 NAICS codes.

1.	2.	3.	4.	5.	6.
7.	8.	9.	10.	11.	12.

State of Delaware Office of Supplier Diversity

APPLICATION

for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)

Note – Sections 5, 6, 7, and 8 must be completed in their entirety BY ALL APPLICANTS for the application to be processed.

5. Are there any written, oral, or implied agreements between persons associated in any manner with the firm concerning its ownership and/or operation? (check one)

No  Yes

If yes, please explain:

6. If the business is a corporation, LLP, or LLC, please list the following information:

a. Total shares authorized (this is the total number of shares possible for the firm):

b. Total shares issued to date (this is the number of shares that stock certificates have been issued for):

c. Are there any restrictions that limit the voting rights of any applicant shareholders, within the By-laws or Articles of Incorporation, or any other documents? No  Yes

If yes, please explain:

7. Has this firm or other firm(s) owned by any of its current owners or officers ever been denied certification by the OSD or any other certifying entity (check one)? No  Yes

(If yes, provide the name of the certifying organization and the reason(s) given for denial, and date of denial. Attach copies of any relevant documents (letters, appeal documents, etc.).

8. Debarment: Is this company, or any other company owned in full or part by any of this company's owners and/or officers, currently prohibited from doing business with the State of Delaware (i.e., license revocation or denial)?

No  Yes

**State of Delaware Office of Supplier Diversity**  
**APPLICATION**  
**for Diverse Business (MBE, WBE, VOB, SDVOBE, & IWDBE) and/or Small Business (SBF)**

**Note – Section 9 must be completed BY ALL APPLICANTS for the application to be processed.**

<p><b>9 Is the Business currently certified as a diverse company (minority, woman, veteran, service disabled veteran, individual with disability, disadvantaged business) or Small Business with any other certifying agency?</b>          No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p><b>If you checked “yes”, please indicate which organization your firm is certified by:</b></p>				
DBE certified by: DeIDOT/MDDOT/PAUCP <input type="checkbox"/>	VetBiz.gov <input type="checkbox"/>	NMSDC <input type="checkbox"/>	WBENC <input type="checkbox"/>	City of Wilmington <input type="checkbox"/>
<b>Name of Certifying Entity:</b>		<b>Certified as (what type of certification):</b>		<b>Expiration Date:</b>
a.				
b.				
c.				
d.				
e.				
f.				

**Note – Sections 10 & 11 must be completed in its entirety ONLY BY DIVERSE BUSINESS APPLICANTS seeking certification for the application to be processed.** (There is not a consequence for all applicants to provide this information if they wish.) **Incomplete applications will not be processed.**

**10. Firm is applying as** (please check all that apply to combined 51% of the ownership and control of the company)

- |   |   |
|---|---|
| <input type="checkbox"/> Small Business<br><input type="checkbox"/> Black or African American<br><input type="checkbox"/> Hispanic American<br><input type="checkbox"/> Subcontinent Asian American<br><input type="checkbox"/> Asian or Asian-Pacific American<br><input type="checkbox"/> Native American | <input type="checkbox"/> Female<br><input type="checkbox"/> Veteran<br><input type="checkbox"/> Service Disabled Veteran<br><input type="checkbox"/> Individual with DisAbility<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Other _____ |
|---|---|

**11. Type of Business Industry** (please check all that apply to the company)

- |   |  |
|---|--|
| <input type="checkbox"/> Building trade<br><input type="checkbox"/> Consultant<br><input type="checkbox"/> Generalized service<br><input type="checkbox"/> Licensed professional services<br><input type="checkbox"/> Other (explain) _____ | <input type="checkbox"/> Manufacturer<br><input type="checkbox"/> Supplier<br><input type="checkbox"/> Highway Construction<br><input type="checkbox"/> Technology |
|---|--|

**State of Delaware Office of Supplier Diversity**

**APPLICATION**

for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)

**Note – Section 12 must be completed in its entirety ONLY IF APPLYING AS A DIVERSE BUSINESS seeking new certification.** Incomplete applications will not be processed. Any portion left blank is considered as an incomplete response. **If applying for Small Business ONLY, you may skip this question.**

**Note – Applicants currently certified by one of the entities identified in Section 9(a) may skip Section 12.**

12.	Name(s) of all individuals performing these tasks. Place an asterisk * next to the name of the person who has final decision authority.	Percentage of time spent on this activity	Ethnicity/Race Veteran & Service Disabled/ Individual with Disability/Gender
Financial Decisions			
Estimating & Bidding			
Negotiating & Contract Execution			
Personnel Management			
Field/Production Operations Supervisor			
Office Management			
Marketing/Sales			
Purchasing of Major Equipment			
Authorized to Sign Company Checks (for any purpose)			

State of Delaware Office of Supplier Diversity

APPLICATION

for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)

Note – Section 13 columns: “Year Ending” and “Gross Sales” may be completed BY ALL APPLICANTS for the application to be processed. All three columns must be completed by SMALL BUSINESS APPLICANTS seeking certification for the application to be processed. Incomplete applications will not be processed.

13. Please list your gross receipts and number of full time equivalents (FTEs) for last three years: (instructions below). NOTE: SBF is based upon a three-year average, if your company has not been in business for three years, you are still welcome to apply. Please list the past three years below and indicate zeros for the Gross Sales and FTEs for the years you were not yet open.

Year ending	Gross Sales	FTEs*

\*FTE means Full Time Equivalent and equals 2,080 hours per year or less, per employee. For folks who work more than 2,080 hours each year, you only count 2,080. Otherwise count all hours of each worker – tally them, and divide by 2,080. That number is then rounded down to a whole number. That is your FTE number for each year.

**HOW TO CALCULATE “FTE”:**

ABC Company has 10 employees plus the owner. In year 2016, they worked as follows:

Owner works 60 hours a week	50 weeks each year (2 weeks’ vacation)	= 3,000 hours	only count 2,080
3 full time employees work 40 hours a week	50 weeks (2 weeks’ vacation each)	= 2,000 each, 6,000 total	count all 6,000
7 part time employees all working various hours	the payroll records totals 7,380 hours, no one worked more than 2,080 hours	= 7,380 total	count all 7,380
			Total = 15,460
			7 FTEs

Add: (the owner 2,080) + (the 3 full timers 6,000) + (staff 7,380) = 15,460 total hours and divide by 2,080 (1 FTE). (15,460/2,080 = 7.43) then round down to the nearest whole number = 7. The results is 7 FTEs for ABC Company. Now take a moment to determine your FTEs for each of the past three years and fill in the chart.

**State of Delaware Office of Supplier Diversity**

**APPLICATION**

**for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)**

**OPTIONAL QUESTIONS 14 & 15**

You are not required to answer the following questions and the answers will not affect your company's eligibility for certification. However, the answers will help OSD to identify business opportunities that may be suited to your company. Answers may be estimated; exact figures are not necessary.

14. OPTIONAL Identify persons or firms who provide Legal, Accounting, and Banking services:		
Attorney:		Contact:
Phone:	Fax:	Email:
Address:		
Accountant:		Contact:
Phone:	Fax:	Email:
Address:		
Bank:		Contact:
Phone:	Fax:	
Address:		

15. OPTIONAL List the three largest contracts or sales completed by the firm during the last three years. List each customer's name and company or organization, the dollar amount of each contract or sale, and the date completed. If any are subcontracts, provide the name of the firm to which you subcontracted.		
a) Company or Individual:		
Address, City, State:		
Phone:	Fax:	Email:
Description & Amount:		
b) Company or Individual:		
Address, City, State:		
Phone:	Fax:	Email:
Description & Amount:		
c) Company or Individual:		
Address, City, State:		
Phone:	Fax:	Email:
Description & Amount:		

**State of Delaware Office of Supplier Diversity**

**APPLICATION**

**for Diverse Business (MBE, WBE, VOB, SDVOB, & IWDBE) and/or Small Business (SBF)**

**OPTIONAL QUESTIONS 16 & 17**

You are not required to answer the following questions and the answers will not affect your company's eligibility for certification. However, the answers will help OSD to identify business opportunities that may be suited to your company. Answers may be estimated; exact figures are not necessary.

<b>16. OPTIONAL QUESTIONS</b>											
How many years has your company been conducting business with you as owner?											
How many contracts, subcontracts, and/or sales has your company completed during the last 12 months?											
What is the largest contract, subcontract, or sale your company completed in the past 24 months?											
Has your company done any business with government?						No		Yes			
If yes, what level of government (check all that apply):						Federal		State		Local	
Has your company done any business with government in the State of Delaware?						No		Yes			
Number of government contracts, subcontracts, or sales completed (estimate):											
For Construction-Related Companies Only (not including suppliers of construction materials)											
What is your company's bonding capacity? (indicate "unknown" if you do not know) \$											
What % of your business is direct contracting?											
What % of your business is subcontracting?											

<b>17. OPTIONAL How did you hear about the Office of Supplier Diversity?</b>	
<input type="checkbox"/> OSD staff speak at an event sponsored by organization	<input type="checkbox"/> OSD staff at a trade show or expo
<input type="checkbox"/> OSD's web	<input type="checkbox"/> Materials published by OSD
<input type="checkbox"/> Referred by another organization	<input type="checkbox"/> Referred by the owner of an OSD or SBF
<input type="checkbox"/> Delaware state employee	<input type="checkbox"/> Other, please explain briefly:

**State of Delaware Office of Supplier Diversity**  
**“CERTIFICATION APPLICATION AFFIDAVIT”**  
**for Diverse Business (MBE, WBE, VOB, SDVOBE, & IWDBE) and/or Small Business (SBF)**

*This form must be completed by each owner upon whom certification is requested.*

I \_\_\_\_\_ (full name printed), am the \_\_\_\_\_ (title) of the applicant firm \_\_\_\_\_ (full name of company). I have read and understood all of the questions in this application and attest that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities, and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I certify that I am a U.S. Citizen or permanent resident and that I own \_\_\_\_\_ percent of the above-referenced firm seeking certification. In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s): **(If applying ONLY as a Small Business then just check that option and no others, otherwise, check ALL that apply.) I am applying as:**

- |  |   |
|--|---|
| <input type="checkbox"/> Small Business                  | <input type="checkbox"/> Female                     |
| <input type="checkbox"/> Black or African American       | <input type="checkbox"/> Veteran                    |
| <input type="checkbox"/> Hispanic American               | <input type="checkbox"/> Service Disabled Veteran   |
| <input type="checkbox"/> Subcontinent Asian American     | <input type="checkbox"/> Individual with DisAbility |
| <input type="checkbox"/> Asian or Asian-Pacific American | <input type="checkbox"/> Other _____                |
| <input type="checkbox"/> Native American                 | <input type="checkbox"/> Other _____                |

I agree to provide additional documents as may be requested to document my membership in any of the diverse or small business groups I have self-identified, and authorize OSD or other state agency to contact any entity named in the application for the purpose of verifying the information and determining my eligibility and/or the named firm's eligibility. I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application. I agree to submit to a scheduled on-site visit if requested, and to permit interviews of the firm's principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of Certification.

I agree to provide written notice to the Office of Supplier Diversity of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownerships, address/telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application will be grounds for denial or revocation of certification, suspension and debarment, and for initiating action under federal and/or state law concerning false statement, fraud, or other applicable offenses. I declare under penalty of perjury that the information provided in this Affidavit, application, and supporting documents is true and correct.

\_\_\_\_\_  
Applicant owner's signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ a.d.  
(Month, Year)

Signed \_\_\_\_\_  
NOTARY PUBLIC IN AND FOR THE  
County of \_\_\_\_\_  
State of \_\_\_\_\_  
My Commission Expires \_\_\_\_\_  
(Date)

