

1310 Heather Ridge Blvd Dunedin, FL 34698 Phone 1 (888) 646-9998 Fax 1 (888) 255-4963

When completed, please email to <u>filings@usbri.us</u> or fax to 1 (888) 255-4963. Questions? Please call 1 (888) 646-9998 and choose Option 1.

<u>Please consider all fields MANDATORY.</u>

GENERAL INFO			
Name of Person Re	Title:		
Direct Phone:	Email:		
UEI(if known):	EI(if known): CAGE Code(if known):		
	ontracts, Awards, or All of the Above:_		
Are you registering	a Government entity?Yes	No	
COMPANY CONTA	CT INFORMATION		
Legal Business Nan	ne:		
	P		
Fax:	Email:		
Website:			
	SSN(sole proprietors only):		
OWNER INFORMA	TION (SOLE PROPRIETORS ONLY)		
Name:	Email:		
	Fax:		
PHYSICAL ADDRE	SS		
Street:	C	ity:	
State:	Zip Code +4:		
MAILING ADDRES	S Check here if same as physical	address	
Street:	C	ity:	
State:	Zip Code +4:		

CORE DATA		
Business Start Date (mm/dd/yyyy):	Fiscal Year	Close(mm/dd):
Taxpayer Name(if different from legal but	siness name):	
Taxpayer Address:		
Does another entity own or control the e	ntity you are registe	ering?YesNo
-If yes, is your Immediate Owner located	doutside the U.S.?	YesNo
-If yes, does your immediate owner alrea	ady have an NCAG	E Code?YesNo
-If yes, please provide Immediate Owne	r's NCAGE Code: _	
-Does another entity own or control your	· Immediate Owner	?YesNo
-If yes, does your highest-level owner al	ready have an NCA	AGE Code?YesNo
-If yes, please provide your highest-leve	l owner's NCAGE (	Code:
Are you a successor to a predecessor the	nat held a federal co	ontract or grant in the last
three years?YesNo		
-If yes, please provide the CAGE Codes	for your three mos	t recent predecessors from
newest to oldest: 1	2	3
TYPE OF ORGANIZATION		
Country of Incorporation:	State of Inco	rporation:
******Please check	all that currently ap	ply*****
For Profit	Non	-profit
Corporation (Non Tax Exempt)	Corporation (T	ax Exempt) S Corp
Sole Proprietorship	U.S. Govt Entif	tyForeign Govt
Partnership/Limited Liability Partne	rship	_Limited Liability Corporation
International Organization	_	Small Agricultural Co-Op
Foreign Owned/Located		Manufacturer of Goods
Other:		
SET ASIDE STATUSES		
******Please check	all that currently/ma	y apply*****
Veteran Owned Business		
Service-Disabled Veteran Owned		
Woman Owned Small Business		

# \_\_\_ Woman Owned Business Small Business Joint Venture Economically-Disadvantaged Woman Owned Small Business Minority Owned 8(a) \_\_\_\_ Asian-Pacific American \_\_\_\_\_ Subcontinent Asian (Asian Indian) \_\_\_\_\_ Black American \_\_\_ Hispanic American \_\_\_\_ Native American \_\_\_\_ Other FINANCIAL INFORMATION Does your company accept credit cards as payment? Yes No Bank Name: \_\_\_\_\_ Bank Phone: \_\_\_\_\_ Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_ \_\_\_\_Checking \_\_\_\_Savings Remittance Address: -In your business' last fiscal year, did you receive both of the following: 1. 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements and 2. \$25,000,000 or more in annual gross revenues from U.S. federal contracts. subcontracts, loans, grants, subgrants, and/or cooperative agreements \_\_\_\_\_ Yes \_\_\_\_ No -Is your business responding to a Federal procurement opportunity that contains the provision at FAR 52.209-7, subject to the clause in FAR 52.209-9 in a current Federal contract, or applying for a Federal grant opportunity which contains the award term and condition described in 2 C.F.R. 200 Appendix XII? Yes \_\_\_\_\_ No Annual receipts: Number of FTE Employees: **NAICS CODES** Please provide any known NAICS Codes for your business, listing your primary first: Please provide any known Product Service codes (PSC/FSC) [if applicable]:

FEMA					
Do you wish to be included in the Disaster Response Registry? Yes No					
-In the case of a disaster, what geographic area can your company serve?					
One State: National National National					
-Does your company require bonding to bid on Contracts? Yes No					
-If yes, please provide the bonding level type, value must be in whole dollars:					
a. Construction Bonding Level, Per Contract (dollars)					
b. Construction Bonding Level, Aggregate (dollars)					
c. Service Bonding Level, Per Contract (dollars)					
d. Service Bonding Level, Aggregate (dollars)					
FAR RESPONSES (#s correspond with registration questions)					
1. Who are the person(s) within your company responsible for determining prices					
offered in bids/proposals (names and titles):					
2. Does your company have other plants/facilities at different addresses routinely used					
to perform on contracts? Yes No					
-If yes, please provide the following: Place of Performance (Address) of the Other					
Plants/Facilities, Name(s) of Owner and Operator of Plant/Facilities, Address(es) of					
Owner and Operator of Plant/Facilities (Street, Address, City, County, State, Zip Code):					
3. Reserved.					
4. For products designated by the Environmental Protection Agency and provided by					
your company, does the percentage of recovered material content meet the applicable					
EPA guidelines? Yes No					
Vendor will provide information with specific offers to the					
Government.					

# United States Business Registration SAM Worksheets (10 pgs.) 5. Is your company a small business concern that wishes to be considered for status as a labor surplus area (LSA) concern? (FAR 52.219-2) Yes No **6.** Is your company owned or controlled by a common parent that files its Federal Income Tax returns on a consolidated basis? (FAR 52.204-3, FAR 52.212-3) Yes No - If yes, please provide legal business name and EIN # of common parent: 7. Are any of your company, or its principals, currently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by any Federal Agency? (FAR 52.209-5, FAR 52.212-3) \_\_\_\_\_ Yes \_\_\_\_ No 8. In the past 3 years, has your company, or any of its principals, been convicted or had a civil judgment rendered against it for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state, or local) contract or subcontract; violation of Federal or state antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, violating Federal criminal tax laws, or receiving stolen property? (FAR 52.209-5, FAR 52.212-3) Yes \_\_\_\_ No -In the past 3 years, has your company been notified of any delinquent Federal Taxes in an amount that exceeds \$3,500 for which liability remains unsatisfied? (FAR 52.209-5, FAR **52.212-3**) \_\_\_\_Yes \_\_\_ No 9. Is your company, or any of its principals, presently indicted for, or otherwise criminally or civilly charged by a governmental entity with, commission of any of the offenses enumerated in Question 8? (FAR 52.209-5, FAR 52.212-3) \_\_\_\_\_Yes \_\_\_\_\_ No **10.** Within the past 3 years, has your company been terminated for cause (default)? (FAR 52.209-5, FAR 52.212-3) \_\_\_\_Yes \_\_\_\_No

11. Please provide the name and unique entity identifier of each party participating in

the HUBZone Joint Venture. (FAR 52.219-1, FAR 52.212-3) None

#### United States Business Registration SAM Worksheets (10 pgs.) Name and UEI:\_\_\_\_\_ 12. Reserved. 13. Reserved. 14. Reserved. **15.** Reserved. **16.** Reserved. 17. Does your company provide any data to the Government that qualifies as limited rights data or restricted computer software? (FAR 52.227-15) Yes No Vendor will provide information with specific offers to the Government 18. Reserved. **19.** Are you a Small Disadvantaged Business? Yes No Small disadvantaged business concern, consistent with 13 CFR 124.1002, means a small business concern under the size standard applicable to the acquisition, that (1) Is at least 51 percent unconditionally and directly owned (as defined at 13 CFR 124.105) by -(i) One or more socially disadvantaged (as defined at 13 CFR 124.103) and economically disadvantaged (as defined at 13 CFR 124.104) individuals who are citizens of the United States: and (ii) Each individual claiming economic disadvantage has a net worth not exceeding \$750,000 after taking into account the applicable exclusions set forth at 13 CFR 124.104(c)(2); and (2) The management and daily business operations of which are controlled (as defined at 13 CFR 124.106) by individuals who meet the criteria in paragraphs (1)(i) and (ii) of this definition. 20. Reserved. 21. Does your company deliver any end products (from the corresponding country of origin) that are listed on the List of Products Requiring Federal Contractor Certification as to Forced or Indentured Child Labor under Executive Order No. 13126? (FAR **52.222-18**, **FAR 52.212-3**) \_\_\_\_\_Yes \_\_\_\_No -If yes, has your company based on a good faith effort to determine whether forced or indentured child labor was used to mine, produce, or manufacture any such end product, determined that it is not aware of any such use of child labor. (FAR 52.222-18, FAR 52.212-3) Yes

USBRI V112023

**52.212-3**) Yes No

22. Has your company held previous contracts/subcontracts subject to Federal

Acquisition Regulation (FAR) 52.222-26 (Equal Opportunity)? (FAR 52.222-22, FAR

23. Are any end products de	livered to the Government by your company foreign
(nondomestic) end products'	? (FAR 52.212-3, FAR 52.225-2, FAR 52.225-4, FAR 52.225-6, DFARS
252.225-7000, DFARS 252.225-70	020, DFARS 252.225-7035)
Yes No	
Vendor will provide info	rmation with specific offers to the Govt.
<u> </u>	·
<b>24.</b> Has your company filed a	all required Equal Employment Opportunity compliance
reports? (FAR 52.222-22, FAR 5	32.212-3) Yes No
<b>25.</b> Please choose one of the	e following statements that applies to your company
(FAR 52.222-25, FAR 52.212-3):	o renorming examination and approve to your company
•	eloped and has on file affirmative action programs required by Secretary of
Labor regulations.	
	have developed and does not have on file affirmative action programs required
by Secretary of Labor regular	tions.  nad previous contracts subject to written affirmative action programs
requirements from Secretary	
	vide maintenance, calibration, and/or repair of information
technology, scientific and me	edical and/or office and business equipment?
(FAR 52.212-3, FAR 52.222-48)	Yes No
Vendor will prov	vide information with specific offers to the Govt.
-If yes, please	answer the following questions: Are the items of equipment
serviced by your com	pany commercial items which are used regularly for other
than Government pur	poses, and are sold or traded by UNITED STATES
BUSINESS REGISTE	RATION INC in substantial quantities to the general public ir
the course of normal I	business operations? (FAR 52.212-3, FAR 52.222-48)Ye
No	
-Are the service	es furnished at prices which are, or are based on,
established catalog or	r market prices? (FAR 52.212-3, FAR 52.222-48)
Yes No	

-Does your company utilize the same compensation (wage and fringe			
benefits) plan for all service employees performing work under Government			
contracts as your company uses for equivalent employees servicing the same			
equipment of commercial customers. (FAR 52.222-48)			
YesNo			
27. Does your company provide services as described in FAR 22.1003-4(d)(1)? (FAR			
<b>52.212-3</b> , <b>FAR 52.222-52</b> )YesNo			
Vendor will provide information with specific offers to the Govt.			
28. Reserved.			
29. Is your company an inverted domestic corporation? (FAR 52.209-2, FAR 52.212-3)			
YesNo			
30. Is your company a subsidiary of an inverted domestic corporation? (FAR 52.209-2, FAR			
<b>52.212-3</b> )YesNo			
<b>31.</b> Reserved.			
<b>32.</b> Does your entity have any unpaid Federal tax liability that has been assessed, for			
which all judicial and administrative remedies have been exhausted or have lapsed, and			
that is not being paid in a timely manner pursuant to an agreement with the authority			
responsible for collecting the tax liability? (FAR 52.209-11)YesNo			
33. Has your entity been convicted of a felony criminal violation under a Federal law			
within the preceding 24 months? (FAR 52.209-11)YesNo			
<b>34.</b> Did your company either receive \$7.5 million or more in Federal contract awards			
during the prior Federal fiscal year requiring it to represent whether it does or does not			
publicly disclose greenhouse gas emissions and a quantitative reduction goal, or			
receive less than \$7.5 million in Federal contract awards during the prior Federal fiscal			
year but still want to represent whether it does or does not publicly disclose greenhouse			
gas emissions and a quantitative reduction goal? (FAR 52.223-22) Yes No			

<b>35.</b> Does your company provide	covered telecommunications equipment or services as
a part of its offered products or s	ervices to the Government in the performance of any
contract, subcontract, or other co	ntractual instrument? (FAR 52.204.26, FAR 52.212-3,
<b>DFARS 252.204-7016</b> ) Yes	_ No
-Does your company use covere	d telecommunications equipment or services, or any
equipment, system, or service th	at uses covered telecommunications equipment or
services?Yes No	
<b>36.</b> Reserved.	
37. Does your company wish to t	oid on, or currently hold any DoD-issued or DoD-funded
contracts? Yes No	
-Does your company wish to app	ly for or currently receive funds from a Federal financial
assistance project or program?	
, , , , ,	<del></del>
ACCOUNTS RECEIVABLE POO	
	Email:
	Title:
ELECTRONIC BUSINESS POC	
Name:	Email:
Phone:	Title:
Address:	
ALTERNATE ELECTRONIC BU	
Name:	Email:
	Title:
Address:	

# United States Business Registration SAM Worksheets (10 pgs.) **GOVERNMENT BUSINESS POC** Name:\_\_\_\_\_ Email:\_\_\_\_\_ Phone: Title: Address: **ALTERNATE GOVERNMENT BUSINESS POC (Optional)** Name:\_\_\_\_\_ Email:\_\_\_\_\_ Phone:\_\_\_\_\_\_ Title:\_\_\_\_\_ Address: We may need to gather additional information in order to complete and submit your SAM Registration. Please provide the best number to reach you at, if different from page one of the worksheet. Phone: United States Business Registration Inc. requires an officer of the company to sign with the submittal of this information. "I attest that the above written information is true to the best of my knowledge, and therefore legally binding." Print Name: Title:



Signature: \_\_\_\_\_ Date: \_\_\_\_\_