



## ACDBE Program - 49 CFR Part 23 October 1, 2017 to September 30, 2022

### Policy Statement

#### Section 23.1, 23.23

#### Objectives/Policy Statement

Aerostar Airport Holdings, LLC, ("Aerostar"), has established an Airport Concession Disadvantaged Business Enterprise (ACDBE) program in accordance with regulations of the U.S. Department of Transportation (DOT), 49 CFR Part 23. Aerostar operates the Luis Muñoz Marín International Airport, a medium hub primary airport that has received federal funds authorized for airport development after January 1988 (authorized under Title 49 of the United States Code). It is Aerostar Policy that no person shall be excluded from participation, denied benefits of, or otherwise discriminated against in relation with the award and performance of any contract covered by the ACDBE Program, on the grounds of race, color, sex, or national origin. To that extent, Aerostar is fully committed to provide equal opportunity and affirmative action to disadvantaged business enterprises and small businesses as defined under DOT's Regulation.

It is Aerostar's Policy to ensure that ACDBEs as defined in Part 23, have an equal opportunity to receive and participate in concession opportunities. It is also our policy:

- To ensure nondiscrimination in the award and administration of opportunities for concessions by airports receiving DOT financial assistance;
- To create a level playing field on which ACDBEs can compete fairly for opportunities for concessions;
- To ensure that our ACDBE program is narrowly tailored in accordance with applicable law;
- To ensure that only firms that fully meet this part's eligibility standards are permitted to participate as ACDBEs at our airport(s);
- To help remove barriers to the participation of ACDBEs in opportunities for concessions at our airport(s); and
- To provide appropriate flexibility to our airports in establishing and providing opportunities for ACDBEs.

Nidia Méndez Joy has been designated as the ACDBE Liaison Officer (ACDBELO). In that capacity, Ms. Méndez Joy is responsible for implementing all aspects of the ACDBE program. Implementation of the ACDBE program is accorded the same priority as compliance with all other legal obligations incurred by the Aerostar in its financial assistance agreements with the Department of Transportation.

Aerostar ACDBE Policy Statement will be circulated through its personnel throughout different levels of supervision, including its Board of Directors, as well as business organizations, ACDBE and Non-ACDBE business communities that perform work for Aerostar. This Policy will also be published through general media and fully incorporated into Aerostar procurement process.

---

Agustin Arellano, Chief Executive Officer

---

Date

# **SUBPART A – GENERAL REQUIREMENTS**

## **Section 23.1 Objectives**

The objectives are found in the policy statement on the first page of this program.

## **Section 23.3 Definitions**

LMMIA – Luis Muñoz Marín International Airport

PRHTPA – Puerto Rico Highway and Transportation Authority

PR – Puerto Rico

UCP – Unified Certification Program

Aerostar will use terms in this program that have the meaning defined in Section 23.3 and Part 26 Section 26.5 where applicable.

## **Section 23.5 Applicability**

Aerostar operates a primary airport and the sponsor of federal airport funds authorized for airport development after January 1988 that was authorized under Title 49 of the United States Code.

## **Section 23.9 Non-discrimination Requirements**

Aerostar will never exclude any person from participation in, deny any person the benefits of, or otherwise discriminate against anyone in connection with the award and performance of any concession agreement, management contract or subcontract, purchase or lease agreement or other agreement covered by 49 CFR Part 23 on the basis of race, color, sex, or national origin.

In administering its ACDBE program, Aerostar will not, directly or through contractual or other arrangements, use criteria or methods of administration that have the effect of defeating or substantially impairing accomplishment of the objectives of the ACDBE program with respect to individuals of a particular race, color, sex, or national origin.

Aerostar acknowledges these representations are also in accordance with obligations contained in its Civil Rights, DBE and ACDBE Airport grant assurances.

Aerostar will include the following assurances in all concession agreements and management contracts it executes with any firm:

(1) This agreement is subject to the requirements of the U.S. Department of Transportation's regulations, 49 CFR Part 23. The concessionaire or contractor agrees that it will not discriminate against any business owner because of the owner's race, color, national origin, or sex in connection with the award or performance of any concession agreement, management contract, or subcontract, purchase or lease agreement, or other agreement covered by 49 CFR Part 23.

(2) The concessionaire or contractor agrees to include the above statements in any subsequent concession agreement or contract covered by 49 CFR Part 23, that it enters and cause those businesses to similarly include the statements in further agreements.

## **Section 23.11 Compliance and Enforcement**

Aerostar will comply with and is subject to the provisions of 49 CFR Part 26 (§§ 26.101 and 26.105 through 26.107).

Aerostar will comply with this part or be subject to formal enforcement action under §26.105 or appropriate program sanctions, such as the suspension or termination of Federal funds, or refusal to approve projects, grants or contracts until deficiencies are remedied. Program sanctions may include actions consistent with 49 U.S.C. §§ 47106(d), 47111(d), and 47122.

Aerostar compliance with all requirements of this part is enforced through the procedures of Title 49 of the United States Code, including 49 U.S.C. 47106(d), 47111(d), and 47122, and regulations implementing them.

Compliance reviews: The FAA may review Aerostar compliance with this part at any time, including but not limited to, reviews of paperwork, on-site reviews, and review of the airport sponsor's monitoring and enforcement mechanism, as appropriate. The FAA Office of Civil Rights may initiate a compliance review based on complaints received.

Any person who knows of a violation of this part by Aerostar may file a complaint under 14 CFR Part 16 with the Federal Aviation Administration Office of Chief Counsel.

The following enforcement actions apply to firms participating in Aerostar ACDBE program:

- (a) For a firm that does not meet the eligibility criteria of subpart C of this part and that attempts to participate as an ACDBE on the basis of false, fraudulent, or deceitful statements or representations or under circumstances indicating a serious lack of business integrity or honesty, the Department of Transportation (DOT) or the Federal Aviation Administration (FAA) may initiate suspension or debarment proceedings against the firm under 49 CFR Part 29.

- (b) For a firm that, in order to meet ACDBE goals or other DBE program requirements, uses or attempts to use, on the basis of false, fraudulent or deceitful statements or representations or under circumstances indicating a serious lack of business integrity or honesty, another firm that does not meet the eligibility criteria of subpart C of this part, DOT or FAA may initiate suspension or debarment proceedings against the firm under 49 CFR Part 29.
- (c) In a suspension or debarment proceeding brought under paragraph (a) or (b) of this section, the FAA may consider the fact that a purported ACDBE has been certified. However, such certification does not preclude DOT from determining that the purported ACDBE, or another firm that has used or attempted to use it to meet ACDBE goals, should be suspended or debarred.
- (d) DOT may take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, against any participant in the ACDBE program whose conduct is subject to such action under 49 CFR Part 31.
- (e) DOT may refer to the Department of Justice, for prosecution under 18 U.S.C. §§ 1001 or other applicable provisions of law, any person who makes a false or fraudulent statement in connection with participation of an ACDBE in Aerostar ACDBE program or otherwise violates applicable Federal statutes.

## SUBPART B – ACDBE PROGRAMS

### Section 23.21      ACDBE Program Updates

Aerostar operates a medium hub primary airport required to have an ACDBE program. As a condition of eligibility for FAA financial assistance, Aerostar will submit its ACDBE program and overall goals to FAA according to the following schedule:

| Primary Airport Size | Initial Program & Goal Due | Third Goal Due  | Period Covered                    | Subsequent Goal Due                 |
|----------------------|----------------------------|-----------------|-----------------------------------|-------------------------------------|
| MEDIUM HUB           | February 1, 2014           | OCTOBER 1, 2017 | 2018/2019/2020/<br>2021/2022/2023 | OCTOBER 1, 2020<br>(2021/2022/2023) |

This ACDBE program will be implemented at Luis Muñoz Marín International Airport.

When Aerostar makes significant changes to its ACDBE program, Aerostar will provide the amended program to the FAA for approval prior to implementing the changes.



## Section 23.23

## Administrative Provisions

**Policy Statement:** Aerostar is committed to operating its ACDBE program in a nondiscriminatory manner. Aerostar Policy Statement is elaborated on the first page of this program.

**ACDBE Liaison Officer (ACDBELO):** Aerostar has designated the following individual as our ACDBELO:

**Mrs. Shara Mathew López**  
DBE/ACDBE Liaison Officer  
Terminal D, First Level  
Luis Muñoz Marín International Airport Carolina, PR 00979  
(787) 289-7240  
[shara.mathew@aerostarairports.com](mailto:shara.mathew@aerostarairports.com)

In that capacity, the ACDBELO is responsible for implementing all aspects of the ACDBE program and ensuring that Aerostar complies with all provision of 49 CFR Part 23. The ACDBELO has direct, independent access to the Chief Executive Officer (CEO) of Aerostar concerning ACDBE program matters. An organizational chart displaying the ACDBELO's position in the organization is found in Attachment 1 to this program.

The ACDBELO is responsible for developing, implementing and monitoring the ACDBE program, in coordination with other appropriate officials. The duties and responsibilities include the following:

1. Gathers and reports statistical data and other information as required by FAA or DOT.
2. Develop policies, procedures, rules and guidelines related to the ACDBE Program.
3. Reviews third party contracts and purchase requisitions for compliance with this program.
4. Ensures that bid notices and requests for proposals are available to ACDBEs in a timely manner.
5. Works with all departments to set overall annual goals.
6. Identifies contracts and procurements so that ACDBE goals are included in solicitations (both race-neutral methods and contract specific goals)
7. Analyzes Aerostar progress toward attainment and identifies ways to improve progress.
8. Participates in pre-bid meetings

9. Advises the CEO and Board of Directors on ACDBE matters and achievement.
10. Provides ACDBEs with information and assistance in preparing bids, obtaining bonding, financing, and insurance; acts as a liaison to the OSD-BU-Minority Resource Center (MRC).
11. Plans and participates in ACDBE training seminars.
12. Provides outreach to ACDBEs and community organizations to advise them of opportunities.

**Directory:** The PRHTA maintains a directory for the PRUCP identifying all firms eligible to participate as ACDBEs. The Directory lists the firm's name, address, phone number, email address, contact person and the type of work the firm has been certified to perform as an ACDBE.

The PRHTA make a monthly revision of the Directory and is available in their webpage in the following address: <http://www.dtop.gov.pr/directoria.asp> The Directory may be found in Attachment 2 to this program document.

## **Section 23.25 Ensuring Nondiscriminatory Participation of ACDBEs**

Aerostar will take the following measures to ensure nondiscriminatory participation of ACDBEs in concessions, and other covered activities (23.25(a)):

1. Aerostar will follow all state and federal laws.
2. Aerostar will ensure that all concessions businesses, and businesses that work with concessionaires, have a fair and equal opportunity to participate in concessions opportunities offered by the airport.
3. Aerostar will ensure that the Airport Personnel with responsibility for the administration of this program will engage in appropriate continuing education, including attendance at annual training seminars and professional conferences.

Aerostar will seek ACDBE participation in all types of concession activities, rather than concentrating participation in one category or a few categories to the exclusion of others. (23.25(c))

Aerostar overall goal methodology and a description of the race-neutral measures it will use to meet the goals are described in Section 23.25 and Attachment 4 of this plan. The goals are set consistent with the requirements of Subpart D. (23.25(b), (d))

Aerostar projects that race-neutral measures alone, are not sufficient to meet an overall goal, it will use race-conscious measures as described in Section 23.25 (e) (1-2) and Attachment 4 and 5 of this plan. (23.25(e))

Aerostar will require businesses subject to ACDBE goals at the airport to make good faith efforts to explore all available options to meet goals, to the maximum extent practicable, through direct ownership arrangements with ACDBEs. (23.25(f))

Aerostar will not use set-asides or quotas as a means of obtaining ACDBE participation. (23.25 (f)(g)).

## **Section 23.27 Reporting**

Aerostar will retain sufficient basic information about our ACDBE program implementation, ACDBE certification and the award and performance of agreements and contracts to enable the FAA to determine our compliance with Part 23. This data will be retained for a minimum of 3 years following the end of the concession agreement or other covered contract.

Aerostar will submit to the FAA Regional Civil Rights Office, an annual ACDBE participation report on the form in Appendix A of Part 23. Aerostar will submit the report to the FAA Regional Civil Right Office via hard copy of the form or electronically via the DBE Office Online Reporting System (DOORS).

## **Section 23.29 Compliance and Enforcement Procedures**

Aerostar will take the following monitoring and enforcement mechanisms to ensure compliance with 49 CFR Part 23.

1. Aerostar will bring to the attention of the Department of Transportation any false, fraudulent, or dishonest conduct in connection with the program, so that DOT can take the steps (e.g., referral to the Department of Justice for criminal prosecution, referral to the DOT Inspector General, action under suspension and debarment or Program Fraud and Civil Penalties rules) provided in 26.107.
2. Aerostar will consider similar action under our own legal authorities, including responsibility determinations in future contracts. Aerostar has listed the regulations, provisions, and contract remedies available to us in the events of non-compliance with the ACDBE regulation by a participant in our procurement activities (See Attachment 3).
3. Aerostar will also implement a monitoring and enforcement mechanism (Attachment 3) to ensure that work committed to ACDBEs at contract award is actually performed by ACDBEs. This mechanism will provide for a running tally of actual ACDBE attainments (e.g., payments actually made to ACDBE firms), including a means of comparing these attainments to commitments. These mechanisms will include, but not be limited to, the following:
  - a) Review solicitation package documentation thoroughly, obtaining clarification, if necessary.

- b) Review monthly reports regarding ACDBE participation to ensure adherence to commitment as represented in agreements and as stipulated in this program.
  - c) Monitor progress of gross revenues generated by ACDBEs and expenditures paid to DBEs as applicable through monthly reports from concessionaires.
  - d) Monitor progress of ACDBEs work through on-site visits and communication with ACDBEs.
4. In our reports of ACDBE participation to FAA, Aerostar will show both commitments and attainments, as required by the DOT reporting form.

## **SUBPART C – CERTIFICATION AND ELIGIBILITY**

### **Section 23.31                      Certifications and standards use to certify ACDBEs**

Aerostar is an official member of the Puerto Rico Unified Certification Program (PRUCP) and is responsible only for the airport ACDBEs new certifications and review of existing firms doing business at the Luis Muñoz Marín International Airport (LMMIA). Under no circumstances, Aerostar shall evaluate and/or certify other airports or agency's ACDBEs, unless the firm requesting certification intends to do business at or for the LMMIA as well.

The PRUCP uses the standards of Subpart D of Part 26, except as provided in 23.31, for certification of ACDBEs to participate in our concessions program and such standards are incorporated herein. To be certified as a ACDBE, a firm must meet all certification eligibility standards. For information about the certification process or to apply for certification, firms should contact:

Mrs. Shara Mathew López  
DBE/ACDBE Liaison Officer  
PO Box 38085, San Juan, PR 00937-1085  
Fax (787) 289-7241  
[shara.mathew@aerostarairports.com](mailto:shara.mathew@aerostarairports.com)

The PRUCP application papers for the certifications are included on attachment 8.

## **SUBPART D – GOALS, GOOD FAITH EFFORTS, AND COUNTING**

### **Section 23.41                      Basic Overall Goal Requirement**

Aerostar will establish two separate overall ACDBE goals; one for car rentals and another for concessions other than car rentals. The overall goals will cover a three-year period and the Aerostar will review the goals annually to make sure the goal continues to fit the

Aerostar’s circumstances. Aerostar will report any significant overall goal adjustments to the FAA.

If the average annual concession revenues for car rentals over the preceding 3 years do not exceed \$200,000, Aerostar need not submit an overall goal for car rentals. Likewise, if the average annual concession revenues for concessions other than car rentals over the preceding 3 years do not exceed \$200,000, Aerostar need not submit an overall goal for concessions other than car rentals. Aerostar understand that “revenue” means total revenue generated by concessions, not the fees received by the airport from concessionaires.

Aerostar overall goals will provide for participation by all certified ACDBEs and will not be subdivided into group-specific goals.

### **Section 23.43 Consultation in Goal Setting**

Aerostar consults with stakeholders before submitting the overall goals to the FAA. Stakeholders will include, but not be limited to, minority and women’s business groups, community organizations, trade associations representing concessionaires currently located at the airport, as well as existing concessionaires themselves, and other officials or organizations which could be expected to have information concerning the availability of disadvantaged businesses, the effects of discrimination on opportunities for ACDBEs, and the sponsors efforts to increase participation of ACDBEs.

When submitting our overall goals, Aerostar will identify the stakeholders that Aerostar consulted with and provide a summary of the information obtained from the stakeholders.

### **Section 23.45 Overall Goals**

Aerostar operates a medium hub primary airport. As a condition of eligibility for FAA financial assistance, Aerostar will submit its overall goals according to the following schedule:

| Primary Airport Size | Third Goal Due  | Period Covered                | Next Goal Due                       |
|----------------------|-----------------|-------------------------------|-------------------------------------|
| Medium Hubs          | October 1, 2017 | 2018/2019/2020/2021/2022/2023 | October 1, 2020<br>(2021/2022/2023) |

Aerostar will establish overall goals in accordance with the 2-Step process as specified in section 23.51. After determining the total gross receipts for the concession activity, the first step is to determine the relative availability of ACDBEs in the market area, “base figure”. The second step is to examine all relevant evidence reasonably available in the sponsor’s jurisdiction to determine if an adjustment to the Step 1 “base figure” is necessary so that the goal reflects as accurately as possible the ACDBE participation the sponsor would expect in the absence of discrimination. Evidence may include, but is not limited

to past participation by ACDBEs, a disparity study, evidence from related fields that affect ACDBE opportunities to form, grow, and compete (such as statistical disparities in ability to get required financing, bonding, insurance; or data on employment, self-employment, education, training and union apprenticeship).

Aerostar will arrange solicitations, times for the presentation of bids, quantities, specifications, and delivery schedules in ways that facilitate participation by ACDBEs and other small businesses and by making contracts more accessible to small businesses, by means such as those provided under § 26.39 of this part.

A description of the methodology to calculate the overall goal for car rentals, the goal calculations, and the data Aerostar relied on can be found in Attachment 5 to this program.

A description of the methodology to calculate the overall goal for concessions other than car rentals, the goal calculations, and the data Aerostar relied on can be found in Attachment 4 to this program.

#### **Projection of Estimated Race-Neutral & Race-Conscious Participation (23.45(f), 23.25(d-e))**

The breakout of estimated race-neutral and race-conscious participation can be found with the goal methodology in Attachments 4 and 5 to this program. This section of the program will be reviewed annually when the goal calculation is reviewed under 23.41(c).

Aerostar is proposing that in meeting the overall goal it will operate in a Race and Gender Conscious environmental. This determination is based on the few concessionaries and provider of good and services Aerostar has certified at the moment as ACDBEs. Aerostar is committed to this program and the implementation of efforts to ensure its success. Aerostar has been spreading the program to different professional organizations, promoting the program on our website, guidance the suppliers of our concessionaries, provide information in the press, among other resources, of the benefits of be part of the program.

#### **Concession Specific Goals (23.25 (c)(e)(1)(iv))**

Aerostar will use concession specific goals to meet any portion of the overall goals it does not project being able to meet using race-neutral means. Concession specific goals are established so that, over the period to which the overall goals apply, they will cumulatively result in meeting any portion of our overall goal that is not projected to be met through the use of race-neutral means.

Aerostar will establish concession specific goals only on those concessions that have direct ownership arrangements (except car rentals), sublease, or subcontracting possibilities. Aerostar will require businesses subject to ACDBE goals at the airport to make good faith efforts to explore all available options to meet goals, to the maximum extent practicable, through direct ownership arrangements with DBEs (23.25 (f)). Car rental firms are not required to change their corporate structure to provide for direct



ownership arrangements. In the case of a car rental goal, where it appears that all or most of the goal is likely to be met through the purchases by car rental companies of vehicles or other goods or services from ACDBEs, one permissible alternative is to structure the goal entirely in terms of purchases of goods and services.

Aerostar need not establish a concession specific goal on every such concession, and the size of concession specific goals will be adapted to the circumstances of each such concession (e.g., type and location of concession, availability of ACDBEs).

If the objective of a concession specific goal is to obtain ACDBE participation through direct ownership with an ACDBE, Aerostar will calculate the goal as a percentage of the total estimated annual gross receipts from the concession. (23.25(e)(1)(i))

If the concession specific goal applies to purchases and/or leases of goods and services, Aerostar will calculate the goal by dividing the estimated dollar value of such purchases and/or leases from ACDBEs by the total estimated dollar value of all purchases to be made by the concessionaire. (23.25(e)(1)(ii))

#### **Good Faith Efforts on Concession Specific Goals (23.25(e)(1)(iii), (iv))**

To be eligible to be awarded a concession that has a concession specific goal, bidders/proposer must make good faith efforts to meet the goal. A bidder/proposer may do so either by obtaining enough ACDBE participation to meet the goal or by documenting that it made sufficient good faith efforts to do so. (23.25(e)(1)(iv)). Examples of good faith efforts are found in Appendix A to 49 CFR Part 26. The procedures applicable to 49 CFR Sections 26.51 and 26.53, regarding contract goals apply to Aerostar concession specific goals. Specifically,

##### Demonstration of good faith efforts (26.53(a) & (c))

The following personnel are responsible for determining whether a concessionaire who has not met the concession specific goal has documented sufficient good faith efforts to be regarded as responsible.

Aerostar will ensure that all information is complete and accurate and adequately documents the bidders/proposer's good faith efforts before Aerostar commit to the concession agreement with the bidders/proposer.

##### Information to be submitted (26.53(b))

Aerostar treats bidders/proposer's compliance with good faith effort requirements as a matter of responsibility.

Each solicitation for which a concession specific goal has been established will require the concessionaires to submit the following information:

1. The names and addresses of ACDBE firms or ACDBE suppliers of goods and services that will participate in the concession;
2. A description of the work that each ACDBE will perform;
3. The dollar amount of the participation of each ACDBE firm/supplier participating;
4. Written and signed documentation of commitment to use a ACDBE whose participation it submits to meet a contract goal;
5. Written and signed confirmation from the ACDBE that it is participating in the concession as provided in the prime concessionaire's commitment and
6. If the contract goal is not met, evidence of good faith efforts

Administrative reconsideration (26.53(d))

Within 7 days of being informed by Aerostar that it is not responsible because it has not documented sufficient good faith efforts, a concessionaire may request administrative reconsideration. Concessionaire should make this request in writing to the following reconsideration official:

**Guillermo Gil Díaz, ESQ.**

Terminal D First Level

Luis Muñoz Marín International Airport Carolina, PR 00936

(787) 289-7240 extension 2028

[guillermo.gil@aerostarairports.com](mailto:guillermo.gil@aerostarairports.com)

The reconsideration official will not have played any role in the original determination that the concessionaire did not document sufficient good faith efforts.

As part of this reconsideration, the concessionaire will have the opportunity to provide written documentation or argument concerning the issue of whether it met the goal or made adequate good faith efforts to do so. The concessionaire will have the opportunity to meet in person with our reconsideration official to discuss the issue of whether it met the goal or made adequate good faith efforts to do. Aerostar will send the concessionaire a written decision on reconsideration, explaining the basis for finding that the concessionaire did or did not meet the goal or make adequate good faith efforts to do so. The result of the reconsideration process is not administratively appealable to the Department of Transportation.

Good Faith Efforts when an ACDBE is replaced on a concession (26.53(f))

Aerostar will require a concessionaire to make good faith efforts to replace an ACDBE that is terminated or has otherwise failed to complete its concession agreement, lease, or subcontract with another certified ACDBE, to the extent needed to meet the concession specific goal. Aerostar will require the concessionaire to notify the ACDBELO immediately of the ACDBEs inability or unwillingness to perform and provide reasonable documentation.

In this situation, Aerostar will require the concessionaire to obtain our prior approval of the substitute ACDBE and to provide copies of new or amended subcontracts, or documentation of good faith efforts. If the concessionaire continues to fail to comply, the contracting officer may issue a termination for default proceeding.

Sample Proposal/Bid Specification:

The requirements of 49 CFR Part 23, regulations of the U.S. Department of Transportation, applies to this concession. It is the policy of Aerostar to practice nondiscrimination based on race, color, sex, or national origin in the award or performance of this contract. All firms qualifying under this solicitation are encouraged to submit bids/proposals. Award of this concession will be conditioned upon satisfying the requirements of this proposal/bid specification. These requirements apply to all concessions firms and suppliers, including those who qualify as an ACDBE. An ACDBE concession specific goal of \_\_\_% percent of *(annual gross receipts; value of leases and/or purchases of goods and services)* has been established for this concession. The concession firm shall make good faith efforts, as defined in Appendix A, 49 CFR Part 26 (Attachment 6), to meet the concession specific goal for ACDBE participation in the performance of this concession.

The concession firm will be required to submit the following information: (1) the names and addresses of ACDBE firms and suppliers that will participate in the concession, (2) A description of the work that each ACDBE will perform; (3) The dollar amount of the participation of each ACDBE firm participating; (4) Written and signed documentation of commitment to use a ACDBE whose participation it submits to meet a contract goal; (5) Written and signed confirmation from the ACDBE that it is participating in the concession as provided in the prime concessionaire's commitment; and (6) If the contract goal is not met, evidence of good faith efforts.

**Section 23.53                      Counting ACDBE Participation for Car Rental Goals**

Aerostar will count Car Rental ACDBE participation toward overall goals as provided in 49 CFR 23.53.

**Section 23.55                      Counting ACDBE Participation for Concessions Other than Car Rentals**

Aerostar will count ACDBE participation toward overall goals other than car rental as provided in 49 CFR 23.55.

### **Section 23.57 Recipient falls short of meeting its overall goals**

(a) If the awards and commitments on our Uniform Report of ACDBE Participation (found in Appendix A to this Part) at the end of any fiscal year are less than the overall goal applicable to that fiscal year, Aerostar will:

- (1) Analyze in detail the reasons for the difference between the overall goal and our awards and commitments in that fiscal year;
- (2) Establish specific steps and milestones to correct the problems Aerostar has identified in our analysis to enable us to fully meet our goal for the new fiscal year;

### **Section 23.61 Quotas or Set-asides**

Aerostar will not use quotas or set-asides as a means of obtaining ACDBE participation.

## **SUBPART E – OTHER PROVISIONS**

### **Section 23.71 Existing Agreements**

Aerostar will assess potential for ACDBE participation when an extension or option to renew an existing agreement is exercised, or when a material amendment is made. Aerostar will use any means authorized by part 23 to obtain a modified amount of ACDBE participation in the renewed or amended agreement.

### **Section 23.73 Privately-Owned or Leased Terminal Buildings**

This section is not applicable to Aerostar.

### **Section 23.75 Long-Term Exclusive Agreements**

Aerostar will not enter into a long-term exclusive agreement for concessions without prior approval of the FAA Regional Civil Rights Office. Aerostar understands that a “long-term” agreement is one having a term of longer than 5 years. Aerostar understand that an “exclusive” agreement is one in which an entire category of a particular business opportunity is limited to a single business entity. If special, local circumstances exist that make it important to enter into a long-term and exclusive agreement, Aerostar will submit detailed information to the FAA Regional Civil Rights Office for review and approval.

## Section 23.79

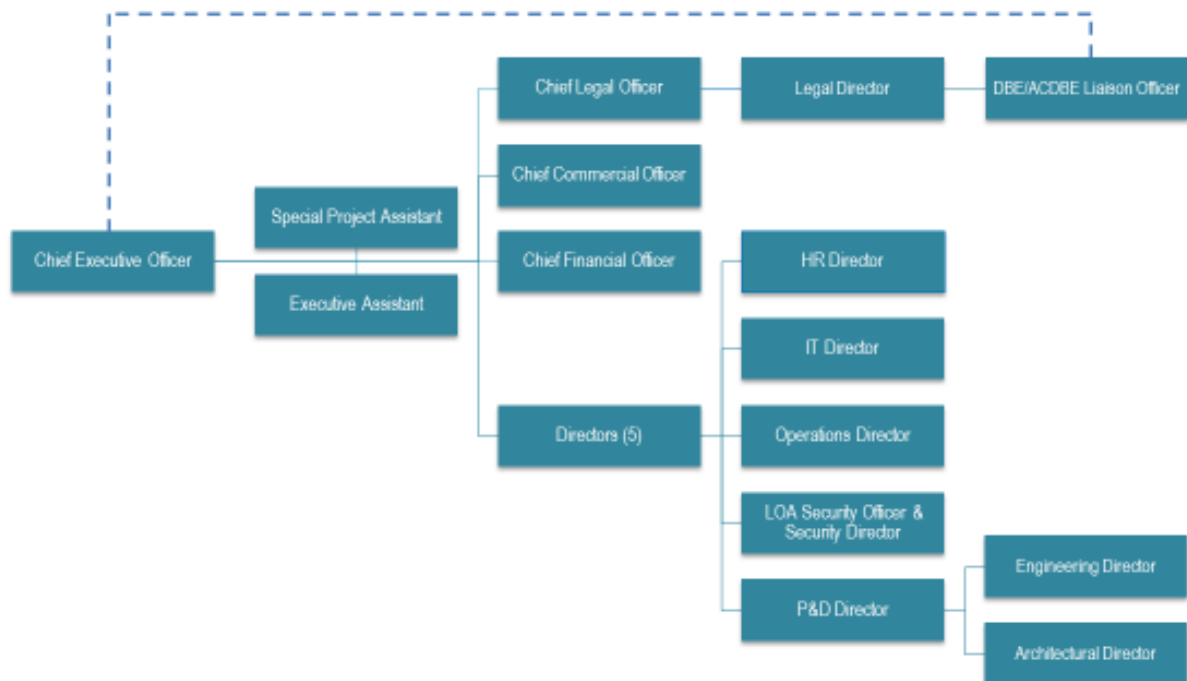
## Geographic Preferences

Aerostar will not use a “local geographic preference”, i.e., any requirement that gives an ACDBE located in one place (e.g., Carolina) an advantage over ACDBEs from other places in obtaining business as, or with, a concession at our airport.

## ATTACHMENT 1

# ORGANIZATIONAL CHART

### Officers & Directors





## ATTACHMENT 2

### DBE DIRECTORY (website link and paper)

<http://www.dtop.gov.pr/directoria.asp>

#### **DISADVANTAGED BUSINESS DIRECTORY DBE FISCAL YEAR 2017**

THE CIVIL RIGHTS OFFICE OF THE PUERTO RICO HIGHWAY AND TRANSPORTATION AUTHORITY-DEPARTMENT OF TRANSPORTATION AND PUBLIC WORKS, THROUGH ITS DBE FEDERAL HIGHWAY ADMINISTRATION SUPPORTIVE SERVICE PROGRAM, HAS PREPARED A DISADVANTAGED BUSINESS DIRECTORY CONTAINING INFORMATION RELATED TO BUSINESS OWNED AND CONTROLLED BY MINORITIES AND WOMEN. THIS DIRECTORY WILL BE DISTRIBUTED AND USED WITH THE INTENTION OF RELATING MINORITY BUSINESS CONCERN CAPABILITIES TO THE RECIPIENT'S NEEDS. FOR ALL PURPOSES, THIS DIRECTORY IS CONSISTENT WITH DOT REGULATION 49 CFR, PART 23 & 26.

THE DIRECTORY WILL CONSIST OF A LIST OF CONTRACTORS, SUBCONTRACTORS, CONSULTANTS, SUPPLIERS, EQUIPMENT AND SUPPLIES, LEASING FIRMS, CONCESSIONARIES AND ALL OTHER RELATED SERVICES. IT WILL BE AVAILABLE TO NON-MINORITY, SMALL MINORITY, GENERAL PUBLIC AND WOMEN CONTROLLED BUSINESS ENTERPRISES. EACH OF OUR SOURCES PROVIDED THE BEST INFORMATION ACCESSIBLE AND WE HAVE DONE OUR BEST TO REPRODUCE IT CORRECTLY. THE INFORMATION INCLUDED IS INTENDED FOR REFERENCE ONLY. WE SINCERELY URGE ALL MINORITY FIRMS IN THE CONSTRUCTION AND TRANSPORTATION INDUSTRY, WITH PARTICULAR EMPHASIS ON THOSE RELATED OR DOING BUSINESS WITH THE DEPARTMENT OF TRANSPORTATION (DOT), TO EMPLOY ALL EFFORTS IN GOOD FAITH, ALONG WITH EXCELLENT BUSINESS SERVICES, TO INSURE THE SUCCESS OF THIS DIRECTORY.

---

ANNIE DEL MORAL  
DEPUTY DIRECTOR  
CIVIL RIGHTS OFFICE

## ATTACHMENT 3

### MONITORING AND ENFORCEMENT MECHANISMS

Aerostar has available several remedies to enforce the ACDBE requirements contained in its contracts, including, but not limited to, the following:

1. Breach of contract action, pursuant to the terms of the contract
2. Other actions deemed appropriate including responsibility reviews on future concession award opportunities

In addition, the federal government has available several enforcement mechanisms that it may apply to firms participating in the ACDBE program, including, but not limited to, the following:

1. Suspension or debarment proceedings pursuant to 49 CFR Part 23;

In a suspension or debarment proceeding, the FAA may consider the fact that a purported ACDBE has been certified. However, such certification does not preclude DOT from determining that the purported ACDBE, or another firm that has used or attempted to use it to meet ACDBE goals, should be suspended or debarred.

2. Enforcement action pursuant to 49 CFR Part 31;

DOT may take enforcement action under 49 CFT Part 31, Program Fraud and Civil Remedies, against any participant in the ACDBE program whose conduct is subject to such action under 49 CFR Part 31; and

3. Prosecution pursuant to 18 USC 1001

DOT may refer to the Department of Justice, for prosecution under 18 U.S.C. 1001 or other applicable provision of law, any person who makes a false or fraudulent statement in connection with participation of an ACDBE in Aerostar's ACDBE program or otherwise violates applicable Federal statutes.

Aerostar will implement various mechanisms to monitor program participants to ensure they comply with Part 23, including, but not limited to the following:

1. Aerostar will insert the following provisions into concessions agreements and management contracts:

- a. This agreement is subject to the requirements of the U.S. Department of Transportation's regulation, 49 CFR Part 23. The concessionaire or contractor agrees that it will not discriminate against any business owner because of the owner's race, color, national origin, or sex in connection with the award or performance of any concession agreement, management contract, or subcontract, purchase or lease agreement, or other agreement covered by 49 CFR Part 23.
  - b. The Concessionaire or contractor agrees to include the above statement in any subsequent concession agreement or contract covered by 49 CFR Part 23, that it enters and cause those businesses to similarly include the statements in further agreements.
- 2. We will implement the following additional monitoring and compliance procedures:
  - a. Concessionaires or contractors will be required to submit monthly gross revenue earned by ACDBEs and expenditures to DBEs.
  - b. Concessionaires or contractors will be required to list the specific duties, functions and responsibilities that ACDBEs or DBEs will perform.
  - c. Concessionaires or contractors will be required to submit, for review, a written notification of any material change in the duties, functions and responsibilities of ACDBEs and DBEs prior to implementing the change.
  - d. Aerostar will review, annually, the specific duties, functions and responsibilities of each ACDBE and DBE to confirm that no material change has occurred.
  - e. Aerostar will perform periodic reviews, including site visits, each year on concessionaires and contractors to confirm ACDBEs and DBEs are performing listed duties, functions and responsibilities.
- 3. We will implement our compliance and monitoring procedures as follows:
  - a. Aerostar will capture monthly gross revenues of concessionaires, including ACDBEs and monitor progress of concessionaire commitments to ACDBEs versus actual participation.

- b. Aerostar will require that concessionaires submit written confirmation, annually, that there are no changes in duties, functions and responsibilities of ACDBEs, including terms and conditions of joint venture agreements.
- c. Aerostar will use appropriate personnel to perform, at least quarterly, reviews of ACDBEs to ensure that their activities correspond to the previously submitted list of duties, functions and responsibilities. All ACDBEs will be reviewed within a three-year period from the start of the review process, at which time the review process will begin again. Reviews will include site visits, reviews of appropriate record, contracts financial information, joint venture agreements, certification information and other relevant information deemed necessary.
- d. Aerostar will request from concessionaires any expenditures made with ACDBEs or DBEs in performing services and supplying goods. Those expenditures will be reported periodically to Aerostar, but no less than semi-annually.
- e. Aerostar will periodically audit a sample of the purchase of good and services claimed to the goals by each concessionaire including the invoices reported with the corresponding payment.
- f. ACDBELO will review all ACDBE Contracts with Aerostar and worksites if any change occurred it will be informed in writing.

## ATTACHMENT 4

### Overall Goal Calculation for Non-Car Rental Concessions FY 2021-23

Name of Recipient: **Aerostar Airport Holdings, LLC**

Name of Airport(s): **LUIS MUNOZ MARIN INTERNATIONAL AIRPORT**

Goal Period: **FY 2021-23 (10/1/2020 through 9/30/2023)**

Overall Three-Year Goal: **7.3%, to be accomplished through 7.3% Race Conscious and 0.0% Race Neutral**

#### **Market Area**

Aerostar Airport Holdings, LLC has determined that the market area for LUIS MUNOZ MARIN INTERNATIONAL AIRPORT is the Commonwealth of Puerto Rico. The market area is the geographical area in which the substantial majority of firms which seek to do concessions business with the airport are located and in which the firms which receive the substantial majority of concessions-related revenues are located.

The concession opportunities anticipated during this goal period for this market area are: food and beverage, advertising, shoe shine, news and gifts, books, electronics, wine and spirits, apparel and good and services.

#### **Base of the goal**

To calculate the base of the goal, Aerostar Airport Holdings, LLC considered the most recent previous 3 years of gross concession receipts and the projected potential concession revenue (gross receipts) three years into the future including upcoming new opportunities.

| Year | Non-Car Rental Concessions Gross Receipts |
|------|---|
| 2018 | \$22,731,542                              |
| 2019 | \$26,995,944                              |
| 2020 | \$16,690,412                              |

Aerostar Airport Holdings, LLC estimates that revenues to existing concessions will grow by an average of 34% each year over the next three years due to Growth estimates considers the reopening of borders for traveling which will increase the passenger traffic. Also concession improvements and an increment in the amount of concessionaires available..

| Year                             | Annual Growth / Reduction Estimate | Annual Gross Receipts Estimate |
|----------------------------------|------------------------------------|--------------------------------|
| 2021                             | 84%                                | \$30,710,358                   |
| 2022                             | 2%                                 | \$31,324,565                   |
| 2023                             | 7%                                 | \$33,517,285                   |
| Three-Year Total Gross Receipts: |                                    | \$95,552,208                   |
| Average Annual Growth Rate:      |                                    | 34%                            |

$\$30,710,358 + \$31,324,565 + \$33,517,285 = \$95,552,208$  which is the recipient's base of goal for non-car rental concessions.

The following are not included in the total gross receipts for concessions: (a) the gross receipts of car rental operations, (b) the dollar amount of a management contract or subcontract with a non-ACDBE, (c) the gross receipts of business activities to which a management contract or subcontract with a non-ACDBE pertains, and (d) any portion of a firm's estimated gross receipts that will not be generated from a concession.

If a new concession opportunity arises prior to the end of this goal period, Aerostar Airport Holdings, LLC will submit to the FAA an appropriate adjustment to the overall goal. This will be submitted to FAA for approval no later than 90 days before issuing the solicitation for the new concession opportunity.

### **Methodology used to Calculate Overall Goal**

Aerostar Airport Holdings, LLC can meet the percentage goal by including any business operated through a management contract or subcontract with an ACDBE. Aerostar Airport Holdings, LLC, and the businesses at the airport, will add the dollar amount of a management contract or subcontract with an ACDBE to the total participation by ACDBEs in airport concessions (both the numerator AND the denominator) and to the base from which the recipients's percentage goal is calculated. However, the dollar amount of a management contract or subcontract with a non-ACDBE and the gross revenue of business activities to which the management contract or subcontract pertains will not be added to this base in either the numerator or denominator.

Aerostar Airport Holdings, LLC, and the businesses at the airport, shall make good faith efforts to explore all available options to achieve, to the maximum extent practicable, compliance with the goal through direct ownership arrangements, including joint ventures and franchises.

Aerostar Airport Holdings, LLC will include goods and services purchases from ACDBEs toward meeting the goal.

### **Step 1 - Actual Relative Availability of ACDBEs - \$23.51 (c)**

We determined the base figure for the relative availability of ACDBEs other than car rentals. The base figure was calculated as follows:

Numerator: Ready, willing, and able non-car rental ACDBEs in the market area  
\_\_\_\_\_ divided by \_\_\_\_\_

Denominator: All ready, willing and able non-car rental concession firms in the market area

The data source(s) used in the calculation included:

- State UCP Data showing the number of ACDBEs that are certified within the market area (<https://act.dtop.pr.gov/derechos-civiles/empresas-en-desventaja-social-y-economica-disadvantaged-business-enterprise/>)
- Census Bureau Data (<https://data.census.gov/cedsci/>)

The calculation and explanation for this is as follows:



| Concession Activity         | NAICS  | # ACDBE Certified Firms | # Total Firms | % Availability |
|-----------------------------|--------|-------------------------|---------------|----------------|
| ATM                         | 522320 | 2                       | 22            | 9.1%           |
| Clothing Stores             | 448150 | 2                       | 156           | 1.3%           |
| Food & Beverage             | 722513 | 1                       | 2126          | 0.0%           |
| Miscellaneous Retail        | 453998 | 1                       | 132           | 0.8%           |
| Personal Care               | 812112 | 3                       | 238           | 1.3%           |
| Restaurant                  | 722511 | 1                       | 1352          | 0.1%           |
| Shoe Shine                  | 812990 | 1                       | 29            | 3.4%           |
| Vending Machines            | 454210 | 2                       | 17            | 11.8%          |
| Average ACDBE Availability: |        |                         |               | 3.5%           |

When we calculated the average availability we arrived at the Step 1 base figure for our overall goal for non-car rental concessions of **3.5%**.

## **Step 2 Adjustment**

After calculating a base figure of the relative availability of ACDBEs, we examined evidence to determine what adjustment was needed to the Step 1 base figure in order to arrive at the overall goal. The data used to determine the adjustment to the base figure was the historic ACDBE Participation achievements.

### **Past History Participation**

| FY    | Race Conscious (%) | Race Neutral (%) | Total Achievement (%) |
|-------|--------------------|------------------|-----------------------|
| FY 18 | 9.4%               | 0.0%             | 9.4%                  |
| FY 19 | 12.3%              | 0.0%             | 12.3%                 |
| FY 20 | 11.1%              | 0.0%             | 11.1%                 |

Arranging this historical data from low to high (9.35%, 11.12%, 12.28%), the median is **11.1%**, which is our Step 2 figure.

Step 1 Base averaged with historical median:  **$(3.5\% + 11.1\%) / 2 = 7.3\%$**

To arrive at an overall goal, the Step 1 base figure was added to the Step 2 adjustment figure and the total was averaged, arriving at an overall goal of **7.3%**. Aerostar Airport Holdings, LLC believes this adjusted goal accurately reflects ACDBE participation that can be achieved for the types of concession activities at the airport during this three-year goal period (FY 2021-23).

## **Breakout of Estimated “Race and Gender Neutral” (RN) and “Race and Gender Conscious” (RC) Participation**

Aerostar Airport Holdings, LLC will make every reasonable effort to meet the maximum feasible portion of its overall goal by using race-neutral means of facilitating ACDBE participation. Aerostar Airport Holdings, LLC will use the following race-neutral measures.

We understand that we will be expected to actually take these steps, and this is not merely a paper exercise.

- Locate and identify ACDBEs and other small businesses who may be interested in participating as concessionaires under 49 CFR Part 23
- Notify ACDBEs of concession opportunities and encouraging them to compete, when appropriate
- When practical, structure concession activities so as to encourage and facilitate the participation of ACDBEs
- Ensure that competitors for concession opportunities are informed during pre-solicitation meetings about how the sponsor's ACDBE program will affect the procurement process
- Provide information concerning the availability of ACDBE firms to competitors to assist them in obtaining ACDBE participation

If race-neutral measures, standing alone, are not sufficient to meet an overall goal, the following race-conscious measures will be used to meet the overall goal:

- Establish concession-specific ACDBE goals for particular concession opportunities.
- Negotiate with potential concessionaires to include ACDBE participation through direct ownership arrangements or measures, in the operation of the concession.

Aerostar Airport Holdings, LLC estimates that, in meeting the overall goal of 7.3%, it will obtain 0.0% from race-neutral participation and 7.3% through race-conscious measures. The reason for the breakout is that Aerostar Airport Holdings, LLC has not been able to achieve its goal in recent past years and will use ACDBE concession goals to achieve this goal.

In order to ensure that Aerostar Airport Holdings, LLC's ACDBE program will be narrowly tailored to overcome the effects of discrimination, if concession specific goals are used, Airport will adjust the estimated breakout of race-neutral and race-conscious participation as needed to reflect actual ACDBE participation and race-neutral and race-conscious participation will be tracked separately. For reporting purposes, race-neutral ACDBE participation includes, but is not necessarily limited to, the following: ACDBE participation through a prime contract that an ACDBE obtains through customary competitive procurement procedures; ACDBE participation through a subcontract on a prime contract that does not carry ACDBE goal; ACDBE participation on a prime contract exceeding a concession specific goal; and ACDBE participation through a subcontract from a prime contractor that did not consider a firm's ACDBE status in making the award.

Aerostar Airport Holdings, LLC will maintain data separately on ACDBE achievements in those contracts with and without concession specific goals, respectively.

## **Consultation**

Aerostar Airport Holdings, LLC routinely meets with stakeholders in an effort to increase ACDBE participation. Stakeholders consulted included minority and women's business groups, community organizations, trade associations representing concessionaires currently located at the airport, as well as existing concessionaires themselves, and other officials or organizations which could be expected to have information concerning the availability of disadvantaged businesses, the effects of discrimination on opportunities for ACDBEs, and the sponsor's efforts to increase participation of ACDBEs.

Specifically, Aerostar Airport Holdings, LLC consulted with:

Airport Shoppes

Starbucks

Dufry

Garbo Mode

El Market

Invicta Watch Group

Avis Budget Car Rental

Thrifty Car Rental

Enterprises Car Rental

Global Lounge

Homyn Enterprise

Jet Set Salon

Banco Popular

Firstbank

Ready Credit

Cardtronics

AT&T

Sky Towers

Show Shine

The consultation was done by video conference.

The following comments were received during the course of the consultation: No comments were received.

## ATTACHMENT 5

### **Overall Goal Calculation for Car Rental Concessions FY 2021-23**

Name of Recipient: **Aerostar Airport Holdings, LLC**

Name of Airport(s): **LUIS MUNOZ MARIN INTERNATIONAL AIRPORT**

Goal Period: **FY 2021-23 (10/1/2020 through 9/30/2023)**

Overall Three-Year Goal: **2.6%, to be accomplished through 2.6% Race Conscious and 0.0% Race Neutral**

#### **Goal Based on Goods and Services Purchases - Determination**

Upon review of the market, it appears that all or most of the goal is likely to be met through the purchases by car rental companies of vehicles or other goods/services from ACDBEs. This is due to the fact that no certified ACDBE car rental companies exist within the market. As such, Aerostar Airport Holdings, LLC has structured the goal entirely in terms of the purchases of goods and services.

We determined the goal based on outreach for the purchases of goods and services from certified ACDBE firms and/or potential ACDBE firms in the market area. This basis is in lieu of a goal based upon a percentage of total gross receipts of car rental operations at the airport. We will make a good faith effort to pursue opportunities to meet the goods and services goal. We will continue to consult and work with the State DOT & UCP, our car rental concessionaires at the airport, similarly situated airports in our region, minority and women businesses in the State, minority serving institutions, local pro-business organizations, and targeted media publications to find prospective ACDBE firms. We will work with our car rental companies to strategize outreach to State DOT & UCP certified ACDBEs that may be able to provide car rental goods and services, to encourage current vendors who may be eligible for ACDBE certification to apply, and to encourage firms already working at the airport but certified as ACDBE in other states, to apply via the interstate certification process. The State DOT & UCP is aware of this requirement and is on board to assist and process certifications as required by 49 CFR Subpart C.

We have the following car rental agencies operating at the airport: Avis & Budget, Thrifty, and PRERAC.

After collaboration and discussion with Aerostar Airport Holdings, LLC, car rental company concessionaires at the airport stated that the goods and services they may need in the goal period are: windshield repair, automotive repair, office supplies, fuel, office equipment, uniforms, safety equipment, etc.

## **Market Area**

The market area is the geographical area in which the substantial majority of firms which seek to do concessions business with the airport are located and in which the firms which receive the substantial majority of concessions-related revenues are located.

Aerostar Airport Holdings, LLC has determined that its market area for LUIS MUNOZ MARIN INTERNATIONAL AIRPORT is the Commonwealth of Puerto Rico.

## **Base of the goal**

To calculate the base of the goal, Aerostar Airport Holdings, LLC considered the previous 3 years of car rental expenditures/purchases and the projected potential car rental expenditures/purchases three years into the future.

### **Car Rental Companies Goods and Services Purchases for Previous 3 Years**

| <b>Year</b> | <b>Car Rental Companies Goods and Services Purchases</b> | <b>Increase/Decrease</b> |
|-------------|--|--------------------------|
| 2018        | \$48,234,343   |                          |
| 2019        | \$53,077,391   | 10%                      |
| 2020        | \$31,520,766   | -41%                     |
|             | Average Decrease:  | -15%                     |

Aerostar Airport Holdings, LLC estimates expenditures will grow by an average of 5% each year over the next three years due to Growth estimates considers the reopening of borders for traveling, due to the pandemic of COVID-19, which will increase the passenger traffic and car rental activities.

| <b>Year</b>                      | <b>Annual Growth / Reduction Estimate</b> | <b>Annual Gross Receipts Estimate</b> |
|----------------------------------|---|---------------------------------------|
| 2021                             | 5%  | \$33,096,804                          |
| 2022                             | 5%  | \$34,751,645                          |
| 2023                             | 5%  | \$36,489,227                          |
| Three-Year Total Gross Receipts: |   | \$104,337,676                         |
| Average Annual Growth Rate:      |   | 5%                                    |

$\$33,096,804 + \$34,751,645 + \$36,489,227 = \mathbf{\$104,337,676}$  which is the recipient's base of goal for car rental goods and services purchases. The following are not included in this base: (a) non-car rental operations.

If a new concession opportunity arises prior to the end of this goal period and the estimated average of annual gross revenues are anticipated to be \$200,000 or greater, the Aerostar Airport Holdings, LLC will submit to the FAA an appropriate adjustment to the overall goal. This will be submitted to FAA for approval no later than 90 days before issuing the solicitation for the new concession opportunity. (23.45(i))

## **Step 1 - Actual Relative Availability of ACDBEs - \$23.51 (c)**

We determined the base figure for the relative availability of ACDBEs for car rental goods and services purchases. The base figure was calculated as follows:

Numerator: Ready, willing, and able non-car rental ACDBEs in the market area  
 \_\_\_\_\_ divided by \_\_\_\_\_

Denominator: All ready, willing and able non-car rental concession firms in the market area

The data source(s) used in the calculation included:

- State UCP Data showing the number of ACDBEs that are certified within the market area ([DBE-Business-Directory-January-2022.pdf \(pr.gov\)](#))
- Census Bureau Data (<https://data.census.gov/cedsci/>)

The calculation and explanation for this is as follows:

| Concession Activity         | NAICS  | # ACDBE Certified Firms | # Total Firms | % Availability |
|-----------------------------|--------|-------------------------|---------------|----------------|
| Auto Glass Repair           | 811122 | 1                       | 22            | 4.5%           |
| Auto Repair                 | 811121 | 1                       | 172           | 0.6%           |
| Car Wash                    | 811192 | 1                       | 60            | 1.7%           |
| Insurance                   | 524210 | 2                       | 482           | 0.4%           |
| Office Maintenance          | 561720 | 2                       | 180           | 1.1%           |
| Office Supplies             | 453210 | 1                       | 105           | 1.0%           |
| Pest Control                | 561710 | 3                       | 79            | 3.8%           |
| Average ACDBE Availability: |        |                         |               | 1.9%           |

When we calculated the average availability we arrived at the Step 1 base figure for our overall goal for car rental concessions of **1.9%**.

## **Step 2 Adjustment**

After calculating a base figure of the relative availability of ACDBEs, we examined evidence to determine what adjustment was needed to the Step 1 base figure in order to arrive at the overall goal. The data used to determine the adjustment to the base figure was the historic ACDBE Participation achievements.

### **Past History Participation**

| FY    | Race Conscious (%) | Race Neutral (%) | Total Achievement (%) |
|-------|--------------------|------------------|-----------------------|
| FY 20 | 2.9%               | 0.0%             | 2.9%                  |
| FY 19 | 3.4%               | 0.0%             | 3.4%                  |
| FY 18 | 4.0%               | 0.0%             | 4.0%                  |

Arranging this historical data from low to high (2.94%, 3.35%, 4.04%), the median is **3.4%**, which is our Step 2 figure.

Step 1 Base averaged with historical median: **(1.9% + 3.4%) / 2 = 2.6%**

To arrive at an overall goal, the Step 1 base figure was added to the Step 2 adjustment figure and the total was averaged, arriving at an overall goal of **2.6%**. Aerostar Airport Holdings, LLC believes this adjusted goal accurately reflects ACDBE participation that can be achieved for the types of concession activities at the airport during this three-year goal period (FY 2021-23).



## **Breakout of Estimated “Race and Gender Neutral” (RN) and “Race and Gender Conscious” (RC) Participation**

Aerostar Airport Holdings, LLC will make every reasonable effort to meet the maximum feasible portion of its overall goal by using race-neutral means of facilitating ACDBE participation. The airport will use the following race-neutral measures.

We understand that we will be expected to actually take these steps, and this is not merely a paper exercise.

- Locate and identify ACDBEs and other small businesses who may be interested in participating as concessionaires under 49 CFR Part 23
- When practical, structure concession activities so as to encourage and facilitate the participation of ACDBEs
- Ensure that competitors for concession opportunities are informed during pre-solicitation meetings about how the sponsor's ACDBE program will affect the procurement process
- Provide information concerning the availability of ACDBE firms to competitors to assist them in obtaining ACDBE participation
- Establish a business development program (see 49 CFR Part 26.35); technical assistance program or taking other steps to foster ACDBE participation in concessions

If race-neutral measures, standing alone, are not sufficient to meet an overall goal, the following race-conscious measures will be used to meet the overall goal:

- Establish concession-specific ACDBE goals for concession opportunities.
- Negotiate with potential concessionaires to include ACDBE participation through direct ownership arrangements or measures, in the operation of the concession.

Aerostar Airport Holdings, LLC estimates that, in meeting the overall goal of 2.6%, it will obtain 0.0% from race-neutral participation and 2.6% through race-conscious measures. The reason for the breakout is that Aerostar Airport Holdings, LLC has not been able to achieve its goal in recent past years and will use ACDBE concession goals to achieve this goal.

In order to ensure that Aerostar Airport Holdings, LLC's ACDBE program will be narrowly tailored to overcome the effects of discrimination, if concession specific goals are used, Airport will adjust the estimated breakout of race-neutral and race-conscious participation as needed to reflect actual ACDBE participation and race-neutral and race-conscious participation will be tracked separately. For reporting purposes, race-neutral ACDBE participation includes, but is not necessarily limited to, the following: ACDBE participation through a prime contract that an ACDBE obtains through customary competitive procurement procedures; ACDBE participation through a subcontract on a prime contract that does not carry ACDBE goal; ACDBE participation on a prime contract exceeding a concession specific goal; and ACDBE participation through a subcontract from a prime contractor that did not consider a firm's ACDBE status in making the award.

Aerostar Airport Holdings, LLC will maintain data separately on ACDBE achievements in those contracts with and without concession specific goals, respectively.

## **Consultation**

Aerostar Airport Holdings, LLC routinely meets with stakeholders in an effort to increase ACDBE participation. Stakeholders consulted included minority and women's business groups, community organizations, trade associations representing concessionaires currently located at the airport, as well as existing concessionaires themselves, and other officials or organizations which could be expected to have information concerning the availability of disadvantaged businesses, the effects of discrimination on opportunities for ACDBEs, and the sponsor's efforts to increase participation of ACDBEs.

Specifically, Aerostar Airport Holdings, LLC consulted with:

Airport Shoppes

Starbucks

Dufry

Garbo Mode

El Market

Invicta Watch Group

Avis Budget Car Rental

Thrifty Car Rental

Enterprises Car Rental

Global Lounge

Homyn Enterprise

Jet Set Salon

Banco Popular

Firstbank

Ready Credit

Cardtronics

AT&T

Sky Towers

Show Shine

The consultation was done by video conference.

The following comments were received during the course of the consultation: No comments were received.

# ATTACHMENT 6

## Demonstration of Good Faith Efforts

### Monthly ACDBE Report



|  |                |      |
|--|----------------|------|
| Monthly ACDBE Report of :<br><i>Airport:</i> | <div>LMM</div> | Date |
|--|----------------|------|

### *PURCHASE OF GOOD AND SERVICES*

| ACDBE Company | Invoice Date | Invoice Number | Invoice Amount |
|---------------|--------------|----------------|----------------|
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |
|               |              |                |                |

#### Good Faith Oath

I certify that upon verification of the ACDBE Directory prepared by the Puerto Rico Highway Authority and Public Works we have determined that there are no certified ACDBE firms that can provide goods or services to our business operations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I Certify that to the best of my knowledge all the information provided in this report is true and accurate and the evidence is available for evaluation.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

# ATTACHMENT 7

## CERTIFICATION APPLICATION FORMS

The Uniform Certification Application form is available at Luis Muñoz Marín International Airport website [http://aeropuertosju.com/wp-content/uploads/2015/05/DBE\\_Certification\\_Application\\_2015.pdf](http://aeropuertosju.com/wp-content/uploads/2015/05/DBE_Certification_Application_2015.pdf) and the Personal



**UNIFORM CERTIFICATION APPLICATION**  
**DISADVANTAGED BUSINESS ENTERPRISE (DBE) /**  
**AIRPORT CONCESSION DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)**  
**49 C.F.R. Parts 23 and 26**

*Roadmap for Applicants*

**1. Should I apply?**

You may be eligible to participate in the DBE/ACDBE program if:

- The firm is a for-profit business that performs or seeks to perform transportation related work (or a concession activity) for a recipient of Federal Transit Administration, Federal Highway Administration, or Federal Aviation Administration funds.
- The firm is at least 51% owned by a socially and economically disadvantaged individual(s) who also controls it.
- The firm's disadvantaged owners are U.S. citizens or lawfully admitted permanent residents of the U.S.
- The firm meets the Small Business Administration's size standard and does not exceed \$23.98 million in gross annual receipts for DBE (\$52.47 million for ACDBEs). (Other size standards apply for ACDBE that are banks/financial institutions, car rental companies, pay telephone firms, and automobile dealers.)

**2. How do I apply?**

First time applicants for DBE certification must complete and submit this certification application and related material to the certifying agency in your home state and participate in an on-site interview conducted by that agency. The attached document checklist can help you locate the items you need to submit to the agency with your completed application. If you fail to submit the required documents, your application may be delayed and/or denied. Firms already certified as a DBE do not have to complete this form, but may be asked by certifying agencies outside of your home state to provide a copy of your initial application form, supporting documents, and any other information you submitted to your home state to obtain certification or to any other state related to your certification.

**3. Where can I send my application?** INSERT UCP PARTICIPATING MEMBER CONTACT INFORMATION

**4. Who will contact me about my application and what are the eligibility standards?**

The DBE and ACDBE Programs require that all U.S. Department of Transportation (DOT) recipients of federal assistance participate in a statewide Unified Certification Program (UCP). The UCP is a one-stop certification program that eliminates the need for your firm to obtain certification from multiple certifying agencies within your state. The UCP is responsible for certifying firms and maintaining a database of certified DBEs and ACDBEs for DOT grantees, pursuant to the eligibility standards found in 49 C.F.R. Parts 23 and 26.

**5. Where can I find more information?**

U.S. DOT—<https://www.civilrights.dot.gov/> (This site provides useful links to the rules and regulations governing the DBE/ACDBE program, questions and answers, and other pertinent information)

SBA—Small Business Size Standards matched to the North American Industry Classification System (NAICS): <http://www.census.gov/eos/www/naics/> and <http://www.sba.gov/content/table-small-business-size-standards>.

In collecting the information requested by this form, the Department of Transportation (Department) complies with the provisions of the Federal Freedom of Information and Privacy Acts (5 U.S.C. 552 and 552a). The Privacy Act provides comprehensive protections for your personal information. This includes how information is collected, used, disclosed, stored, and discarded. Your information will not be disclosed to third parties without your consent. The information collected will be used solely to determine your firm's eligibility to participate in the Department's Disadvantaged Business Enterprise Program as defined in 49 CFR §26.5 and the Airport Concession Disadvantaged Business Enterprise Program as defined in 49 CFR §23.3. You may review DOT's complete Privacy Act Statement in the Federal Register published on April 11, 2000 (65 FR 19477).

Under 49 C.F.R. §26.107, dated February 2, 1999 and January 28, 2011, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 2 CFR Parts 180 and 1200, Nonprocurement Suspension and Department, take enforcement action under 49 C.F.R. Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.



**INSTRUCTIONS FOR COMPLETING THE  
DISADVANTAGED BUSINESS ENTERPRISE (DBE)  
AIRPORT CONCESSIONS DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)  
UNIFORM CERTIFICATION APPLICATION**

**NOTE:** All participating firms must be for-profit enterprises. If your firm is not for profit, then you do NOT qualify for the DBE/ACDBE program and should not complete this application. If you require additional space for any question in this application, please attach additional sheets or copies as needed, taking care to indicate on each attached sheet/copy the section and number of this application to which it refers.

**Section 1: CERTIFICATION INFORMATION**

**A. Basic Contact Information**

- (1) Enter the contact name and title of the person completing this application and the person who will serve as your firm's contact for this application.
- (2) Enter the legal name of your firm, as indicated in your firm's Articles of Incorporation or charter.
- (3) Enter the primary phone number of your firm.
- (4) Enter a secondary phone number, if any.
- (5) Enter your firm's fax number, if any.
- (6) Enter the contact person's email address.
- (7) Enter your firm's website addresses, if any.
- (8) Enter the street address of the firm where its offices are physically located (not a P.O. Box).
- (9) Enter the mailing address of your firm, if it is different from your firm's street address.

**B. Prior/Other Certifications and Applications**

- (10) Check the appropriate box indicating whether your firm is currently certified in the DBE/ACDBE programs, and provide the name of the certifying agency that certified your firm. List the dates of any site visits conducted by your home state and any other states or UCP members. Also provide the names of state/UCP members that conducted the review.
- (11) Indicate whether your firm or any of the persons listed has ever been denied certification as a DBE, 8(a), or Small Disadvantaged Business (SDB) firm, or state and local MBE/WBE firm. Indicate if the firm has ever been decertified from one of these programs. Indicate if the application was withdrawn or whether the firm was debarred, suspended, or otherwise had its bidding privileges denied or restricted by any state or local agency, or Federal entity. If your answer is yes, identify the name of the agency, and explain fully the nature of the action in the space provided. Indicate if you have ever appealed this decision to the Department and if so, attach a copy of USDOT's final agency decision(s).

**Section 2: GENERAL INFORMATION**

**A. Business profile:**

- (1) Give a concise description of the firm's primary activities, the product(s) or services the company provides, or type of construction. If your company offers more than one product/service, list primary product or service first (attach additional sheets if necessary). This description may be used in our UCP online directory if you are certified as a DBE.

- (2) If you know the appropriate NAICS Code for the line(s) of work you identified in your business profile, enter the codes in the space provided.
- (3) State the date on which your firm was established as stated in your firm's Articles of Incorporation or charter.
- (4) State the date each person became a firm owner.
- (5) Check the appropriate box describing the manner in which you and each other owner acquired ownership of your firm. If you checked "Other," explain in the space provided.
- (6) Check the appropriate box that indicates whether your firm is "for profit." If you checked "No," then you do NOT qualify for the DBE/ACDBE program and should not complete this application. All participating firms must be for-profit enterprises. If the firm is a for profit enterprise, provide the Federal Tax ID number as stated on your firm's Federal tax return.
- (7) Check the appropriate box that describes the type of legal business structure of your firm, as indicated in your firm's Articles of Incorporation or similar document. Identify all joint venture partners if applicable. If you checked "Other," briefly explain in the space provided.
- (8) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time, part-time, and seasonal basis. Attach a list of employees, their job titles, and dates of employment, to your application.
- (9) Specify the firm's gross receipts for each of the past three years, as stated in your firm's filed Federal tax returns. You must submit complete copies of the firm's Federal tax returns for each year. If there are any affiliates or subsidiaries of the applicant firm or owners, you must provide these firms' gross receipts and submit complete copies of these firm(s) Federal tax returns. Affiliation is defined in 49 C.F.R. §26.5 and 13 C.F.R. Part 121.

**B. Relationships and Dealings with Other Businesses**

- (1) Check the appropriate box that indicates whether your firm is co-located at any of its business locations, or whether your firm shares a telephone number(s), a post office box, any office space, a yard, warehouse, other facilities, any equipment, financing, or any office staff and/or employees with any other business, organization or entity of any kind. If you answered "Yes," then specify the name of the other firm(s) and fully explain the nature of your relationship with these other businesses by identifying the business or person with whom you have any formal, informal, written, or



oral agreement. Provide an explanation of any items shared with other firms in the space provided.

- (2) Check the appropriate box indicating whether any other firm currently has or had an ownership interest in your firm at present or at any time in the past. If you checked yes, please explain.
- (3) Check the appropriate box that indicates whether at present or at any time in the past your firm:
  - (a) ever existed under different ownership, a different type of ownership, or a different name;
  - (b) existed as a subsidiary of any other firm;
  - (c) existed as a partnership in which one or more of the partners are/were other firms;
  - (d) owned any percentage of any other firm; and
  - (e) had any subsidiaries of its own.
- (f) served as a subcontractor with another firm constituting more than 25% of your firm's receipts.

If you answered "Yes" to any of the questions in (3)(a-f), you may be asked to explain the arrangement in detail.

### Section 3: MAJORITY OWNER INFORMATION

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (if your firm has more than one owner, provide completed copies of this section for each owner):

#### A. Identify the majority owner of the firm holding 51% or more ownership interest

- (1) Enter the full name of the owner.
- (2) Enter his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) Enter his/her home (street) address.
- (5) Indicate this owner's gender.
- (6) Identify the owner's ethnic group membership. If you checked "Other," specify this owner's ethnic group/identity not otherwise listed.
- (7) Check the appropriate box to indicate whether this owner is a U.S. citizen or a lawfully admitted permanent resident. If this owner is neither a U.S. citizen nor a lawfully admitted permanent resident of the U.S., then this owner is NOT eligible for certification as a DBE owner.
- (8) Enter the number of years during which this owner has been an owner of your firm.
- (9) Indicate the percentage of the total ownership this person holds and the date acquired, including (if appropriate), the class of stock owned.
- (10) Indicate the dollar value of this owner's initial investment to acquire an ownership interest in your firm, broken down by cash, real estate, equipment, and/or other investment. Describe how you acquired your business and attach documentation substantiating this investment.

#### B. Additional Owner Information

- (1) Describe the familial relationship of this owner to each other owner of your firm and employees.
- (2) Indicate whether this owner performs a management or supervisory function for any other business. If you

checked "Yes," state the name of the other business and this owner's function/title held in that business.

- (3) (a) Check the appropriate box that indicates whether this owner owns or works for any other firm(s) that has any relationship with your firm. If you checked "Yes," identify the name of the other business, the nature of the business relationship, and the owner's function at the firm.
  - (b) If the owner works for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week, please identify this activity.
- (4) (a) Provide the personal net worth of the owner applying for certification in the space provided. Complete and attach the accompanying "Personal Net Worth Statement for DBE/ACDBE Program Eligibility" with your application. Note, complete this section and accompanying statement only for each owner applying for DBE qualification (i.e., for each owner claiming to be socially and economically disadvantaged).
- (b) Check the appropriate box that indicates whether any trust has been created for the benefit of the disadvantaged owner(s). If you answered "Yes," you may be asked to provide a copy of the trust instrument.
- (5) Check the appropriate to indicate whether any of your immediate family members, managers, or employees, own, manage, or are associated with another company. Immediate family member is defined in 49 C.F.R. §26.5. If you answered "Yes," provide the name of each person, your relationship to them, the name of the company, the type of business, and whether they own or manage the company.

### Section 4: CONTROL

#### A. Identify the firm's Officers and Board of Directors

- (1) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each officer.
- (2) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each individual serving on your firm's Board of Directors.
- (3) Check the appropriate box to indicate whether any of your firm's officers and/or directors listed above performs a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
- (4) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above own or work for any other firm(s) that has a relationship with your firm. (e.g., ownership interest, shared office space, financial investments, equipment leases, personnel sharing, etc.) If you answered "Yes," identify the name of the firm, the individual's name, and the nature of his/her business relationship with that other firm.



**B. Duties of Owners, Officers, Directors, Managers and Key Personnel**

(1), (2) Specify the roles of the majority and minority owners, directors, officers, and managers, and key personnel who control the functions listed for the business. Submit résumés for each owner and non-owner identified below. State the name of the individual, title, race and gender and percentage ownership if any. Circle the frequency of each person's involvement as follows: "always, frequently, seldom, or never" in each area.

Indicate whether any of the persons listed in this section perform a management or supervisory function for any other business. Identify the person, business, and their title/function. Identify if any of the persons listed above own or work for any other firm(s) that has a relationship with this firm (e.g. ownership interest, shared office space, financial investment, equipment, leases, personnel sharing, etc.) If you answered "Yes," describe the nature of his/her business relationship with that other firm.

**C. Inventory:** Indicate firm inventory in these categories:

**(1) Equipment and Vehicles**

State the make and model, and current dollar value of each piece of equipment and motor vehicle held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm or owner, whether it is used as collateral, and where this item is stored.

**(2) Office Space**

State the street address of each office space held and/or used by your firm. Indicate whether your firm or owner owns or leases the office space and the current dollar value of that property or its lease.

**(3) Storage Space**

State the street address of each storage space held and/or used by your firm. Indicate whether your firm or owner owns or leases the storage space and the current dollar value of that property or its lease. Provide a signed lease agreement for each property.

**D. Does your firm rely on any other firm for management functions or employee payroll?**

Check the appropriate box that indicates whether your firm relies on any other firm for management functions or for employee payroll. If you answered "Yes," you may be asked to explain the nature of that reliance and the extent to which the other firm carries out such functions.

**E. Financial / Banking Information**

**Banking Information.** State the name, City and State of your firm's bank. In the space provided, identify the persons able to sign checks on this account. Provide bank authorization and signature cards

**Bonding Information.** State your firm's bonding limits (in dollars), specifying both the aggregate and project limits.

**F. Sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms guaranteeing the loan.**

State the name and address of each source, the name of person securing the loan, original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm. Provide copies of signed loan agreements and security agreements

**G. Contributions or transfers of assets to/from your firm and to/from any of its owners or another individual over the past two years:**

Indicate in the spaces provided, the type of contribution or asset that was transferred, its current dollar value, the person or firm from whom it was transferred, the person or firm to whom it was transferred, the relationship between the two persons and/or firms, and the date of the transfer.

**H. Current licenses/permits held by any owner or employee of your firm.**

List the name of each person in your firm who holds a professional license or permit, the type of permit or license, the expiration date of the permit or license, and issuing State of the license or permit. Attach copies of licenses, license renewal forms, permits, and haul authority forms.

**I. Largest contracts completed by your firm in the past three years, if any.**

List the name of each owner or contractor for each contract, the name and location of the projects under each contract, the type of work performed on each contract, and the dollar value of each contract.

**J. Largest active jobs on which your firm is currently working.**

For each active job listed, state the name of the prime contractor and the project number, the location, the type of work performed, the project start date, the anticipated completion date, and the dollar value of the contract.

**AIRPORT CONCESSION (ACDBE) APPLICANTS**

Identify the concession space, address and location at the airport, the value of the property or lease, and fees/lease payments paid to the airport. Provide information concerning any other airport concession businesses the applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of the concession enterprise.

**AFFIDAVIT & SIGNATURE**

The Affidavit of Certification must accompany your application for certification. Carefully read the attached affidavit in its entirety. Fill in the required information for each blank space, and sign and date the affidavit in the presence of a Notary Public, who must then notarize the form.



Section 1: CERTIFICATION INFORMATION



**A. Basic Contact Information**

(1) Contact person and Title: \_\_\_\_\_ (2) Legal name of firm: \_\_\_\_\_  
\_\_\_\_\_  
(3) Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_ (4) Other Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_ (5) Fax #: ( ) \_\_\_\_\_ - \_\_\_\_\_  
(6) E-mail: \_\_\_\_\_ (7) Firm Websites: \_\_\_\_\_  
(8) Street address of firm (No P.O. Box): \_\_\_\_\_ City: \_\_\_\_\_ County/Parish: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_  
(9) Mailing address of firm (if different): \_\_\_\_\_ City: \_\_\_\_\_ County/Parish: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

**B. Prior/Other Certifications and Applications**

(10) Is your firm currently certified for any of the following U.S. DOT programs?

☐ DBE ☐ ACDBE Names of certifying agencies: \_\_\_\_\_

⊗ If you are certified in your home state as a DBE/ACDBE, you do not have to complete this application for other states. Ask your state UCP about the interstate certification process.

List the dates of any site visits conducted by your home state and any other states or UCP members:

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ State/UCP Member: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ State/UCP Member: \_\_\_\_\_

(11) Indicate whether the firm or any persons listed in this application have ever been:

- (a) Denied certification or decertified as a DBE, ACDBE, 8(a), SDB, MBE/WBE firm? ☐ Yes ☐ No  
(b) Withdrawn an application for these programs, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity? ☐ Yes ☐ No

If yes, explain the nature of the action. (If you appealed the decision to DOT or another agency, attach a copy of the decision,

\_\_\_\_\_  
\_\_\_\_\_

Section 2: GENERAL INFORMATION

**A. Business Profile:** (1) Give a concise description of the firm's primary activities and the product(s) or service(s) it provides. If your company offers more than one product/service, list the primary product or service first. Please use additional paper if necessary. This description may be used in our database and the UCP online directory if you are certified as a DBE or ACDBE.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Applicable NAICS Codes for this line of work include: \_\_\_\_\_  
(3) This firm was established on \_\_\_\_/\_\_\_\_/\_\_\_\_ (4) I/We have owned this firm since: \_\_\_\_/\_\_\_\_/\_\_\_\_

(5) Method of acquisition (Check all that apply):

- ☐ Started new business ☐ Bought existing business ☐ Inherited business ☐ Secured concession  
☐ Merger or consolidation ☐ Other (explain) \_\_\_\_\_



(6) Is your firm "for profit"? ☐ Yes ☐ No →  
Federal Tax ID# \_\_\_\_\_

⊗ **STOP!** If your firm is NOT for-profit, then you do NOT  
qualify for this program and should not fill out this application.

(7) Type of Legal Business Structure: (check all that apply):

- ☐ Sole Proprietorship      ☐ Limited Liability Partnership  
☐ Partnership      ☐ Corporation  
☐ Limited Liability Company      ☐ Joint Venture (Identify all JV partners \_\_\_\_\_)  
☐ Applying as an ACDBE      ☐ Other, Describe \_\_\_\_\_

(8) Number of employees: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Seasonal \_\_\_\_\_ Total \_\_\_\_\_  
(Provide a list of employees, their job titles, and dates of employment, to your application).

(9) Specify the firm's gross receipts for the last 3 years. (Submit complete copies of the firm's Federal tax returns for each year. If there are affiliates or subsidiaries of the applicant firm or owners, you must submit complete copies of these firms' Federal tax returns).

|            |   |  |
|------------|---|--|
| Year _____ | Gross Receipts of Applicant Firm \$ _____ | Gross Receipts of Affiliate Firms \$ _____ |
| Year _____ | Gross Receipts of Applicant Firm \$ _____ | Gross Receipts of Affiliate Firms \$ _____ |
| Year _____ | Gross Receipts of Applicant Firm \$ _____ | Gross Receipts of Affiliate Firms \$ _____ |

#### **B. Relationships and Dealings with Other Businesses**

(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office or storage space, yard, warehouse, facilities, equipment, inventory, financing, office staff, and/or employees with any other business, organization, or entity? ☐ Yes ☐ No

If Yes, explain the nature of your relationship with these other businesses by identifying the business or person with whom you have any formal, informal, written, or oral agreement. Also detail the items shared.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Has any other firm had an ownership interest in your firm at present or at any time in the past?

☐ Yes ☐ No If Yes, explain \_\_\_\_\_

(3) At present, or at any time in the past, has your firm:

- (a) Ever existed under different ownership, a different type of ownership, or a different name? ☐ Yes ☐ No  
(b) Existed as a subsidiary of any other firm? ☐ Yes ☐ No  
(c) Existed as a partnership in which one or more of the partners are/were other firms? ☐ Yes ☐ No  
(d) Owned any percentage of any other firm? ☐ Yes ☐ No  
(e) Had any subsidiaries? ☐ Yes ☐ No  
(f) Served as a subcontractor with another firm constituting more than 25% of your firm's receipts? ☐ Yes ☐ No

(If you answered "Yes" to any of the questions in (2) and/or (3)(a)-(f), you may be asked to provide further details and explain whether the arrangement continues).



### Section 3: MAJORITY OWNER INFORMATION

#### A. Identify the majority owner of the firm holding 51% or more ownership interest.

|                                       |            |                   |
|---------------------------------------|------------|-------------------|
| (1) Full Name:                        | (2) Title: | (3) Home Phone #: |
| _____                                 | _____      | ( ) _____ - _____ |
| (4) Home Address (Street and Number): | City:      | State:            |
| _____                                 | _____      | _____ - _____     |
| Zip: _____                            |            |                   |

(5) Gender: ☐ Male ☐ Female

(6) Ethnic group membership (Check all that apply):

- ☐ Black ☐ Hispanic  
☐ Asian Pacific ☐ Native American  
☐ Subcontinent Asian  
☐ Other (specify) \_\_\_\_\_

(7) U.S. Citizenship:

- ☐ U.S. Citizen  
☐ Lawfully Admitted Permanent Resident

(8) Number of years as owner: \_\_\_\_\_

(9) Percentage owned: \_\_\_\_\_ %

Class of stock owned: \_\_\_\_\_

Date acquired: \_\_\_\_\_

| (10) Initial investment to acquire ownership interest in firm: | Type        | Dollar Value |
|--|-------------|--------------|
|  | Cash        | \$ _____     |
|  | Real Estate | \$ _____     |
|  | Equipment   | \$ _____     |
|  | Other       | \$ _____     |

Describe how you acquired your business:

- ☐ Started business myself  
☐ It was a gift from: \_\_\_\_\_  
☐ I bought it from: \_\_\_\_\_  
☐ I inherited it from: \_\_\_\_\_  
☐ Other: \_\_\_\_\_

(Attach documentation substantiating your investment)

#### B. Additional Owner Information

(1) Describe familial relationship to other owners and employees:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Does this owner perform a management or supervisory function for any other business? ☐ Yes ☐ No

If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_

(3)(a) Does this owner own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.) ☐ Yes ☐ No

Identify the name of the business, and the nature of the relationship, and the owner's function at the firm:

\_\_\_\_\_  
\_\_\_\_\_

(b) Does this owner work for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week? If yes, identify this activity: \_\_\_\_\_

(4)(a) What is the personal net worth of this disadvantaged owner applying for certification? \$ \_\_\_\_\_

(b) Has any trust been created for the benefit of this disadvantaged owner(s)? ☐ Yes ☐ No

(If Yes, you may be asked to provide a copy of the trust instrument).

(5) Do any of your immediate family members, managers, or employees own, manage, or are associated with another company? ☐ Yes ☐ No If Yes, provide their name, relationship, company, type of business, and indicate whether they own or manage the company: (Please attach extra sheets, if needed): \_\_\_\_\_



### Section 3: OWNER INFORMATION, Cont'd.

**A. Identify all individuals, firms, or holding companies that hold LESS THAN 51% ownership interest in the firm** (Attach separate sheets for each additional owner)

(1) Full Name: \_\_\_\_\_ (2) Title: \_\_\_\_\_ (3) Home Phone #: \_\_\_\_\_  
( ) - \_\_\_\_\_

(4) Home Address (Street and Number): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_

(5) Gender: ☐ Male ☐ Female

(6) Ethnic group membership (Check all that apply)

- ☐ Black ☐ Hispanic  
☐ Asian Pacific ☐ Native American  
☐ Subcontinent Asian  
☐ Other (specify) \_\_\_\_\_

(7) U.S. Citizenship:

- ☐ U.S. Citizen  
☐ Lawfully Admitted Permanent Resident

(8) Number of years as owner: \_\_\_\_\_

(9) Percentage owned: \_\_\_\_\_ %

Class of stock owned: \_\_\_\_\_

Date acquired \_\_\_\_\_

| (10) Initial investment to acquire ownership interest in firm: | Type        | Dollar Value |
|--|-------------|--------------|
|  | Cash        | \$ _____     |
|  | Real Estate | \$ _____     |
|  | Equipment   | \$ _____     |
|  | Other       | \$ _____     |

Describe how you acquired your business:

- ☐ Started business myself  
☐ It was a gift from: \_\_\_\_\_  
☐ I bought it from: \_\_\_\_\_  
☐ I inherited it from: \_\_\_\_\_  
☐ Other \_\_\_\_\_

(Attach documentation substantiating your investment)

### B. Additional Owner Information

(1) Describe familial relationship to other owners and employees:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Does this owner perform a management or supervisory function for any other business? ☐ Yes ☐ No

If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_

(3)(a) Does this owner own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.) ☐ Yes ☐ No

Identify the name of the business, and the nature of the relationship, and the owner's function at the firm:

(b) Does this owner work for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week? If yes, identify this activity: \_\_\_\_\_

(4)(a) What is the personal net worth of this disadvantaged owner applying for certification? \$ \_\_\_\_\_

(b) Has any trust been created for the benefit of this disadvantaged owner(s)? ☐ Yes ☐ No

(If Yes, you may be asked to provide a copy of the trust instrument).

(5) Do any of your immediate family members, managers, or employees own, manage, or are associated with another company? ☐ Yes ☐ No If Yes, provide their name, relationship, company, type of business, and indicate whether they own or manage: (Please attach extra sheets, if needed): \_\_\_\_\_

## Section 4: CONTROL



### A. Identify your firm's Officers and Board of Directors (If additional space is required, attach a separate sheet):

|                             | Name | Title | Date Appointed | Ethnicity | Gender |
|-----------------------------|------|-------|----------------|-----------|--------|
| (1) Officers of the Company | (a)  |       |                |           |        |
|                             | (b)  |       |                |           |        |
|                             | (c)  |       |                |           |        |
|                             | (d)  |       |                |           |        |
| (2) Board of Directors      | (a)  |       |                |           |        |
|                             | (b)  |       |                |           |        |
|                             | (c)  |       |                |           |        |
|                             | (d)  |       |                |           |        |

### (3) Do any of the persons listed above perform a management or supervisory function for any other business?

☐ Yes ☐ No If Yes, identify for each:

Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

### (4) Do any of the persons listed in section A above own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)

☐ Yes ☐ No If Yes, identify for each:

Firm Name: \_\_\_\_\_ Person: \_\_\_\_\_  
 Nature of Business Relationship: \_\_\_\_\_

### B. Duties of Owners, Officers, Directors, Managers, and Key Personnel

#### 1. (Identify your firm's management personnel who control your firm in the following areas (Attach separate sheets as needed).)

| A = Always<br>F = Frequently   | S = Seldom<br>N = Never | Majority Owner (51% or more) |        |                |   | Minority Owner (49% or less) |        |                |   |
|--|-------------------------|------------------------------|--------|----------------|---|------------------------------|--------|----------------|---|
|  |                         | Name:                        | Title: | Percent Owned: |   | Name:                        | Title: | Percent Owned: |   |
| Sets policy for company direction/scope of operations                  |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Bidding and estimating   |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Major purchasing decisions   |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Marketing and sales  |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Supervises field operations  |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Attend bid opening and lettings  |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Perform office management (billing, accounts receivable/payable, etc.) |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Hires and fires management staff                                       |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Hire and fire field staff or crew                                      |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Designates profits spending or investment                              |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Obligates business by contract/credit                                  |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Purchase equipment   |                         | A                            | F      | S              | N | A                            | F      | S              | N |
| Signs business checks  |                         | A                            | F      | S              | N | A                            | F      | S              | N |



**2. Complete for all Officers, Directors, Managers, and Key Personnel who control the following functions for the firm. (Attach separate sheets as needed).**

| <b>A= Always      S = Seldom</b><br><b>F = Frequently    N = Never</b> | Officer/Director/Manager/Key Personnel  |   |   |   | Officer/Director/Manager/ Key Personnel                                       |   |   |   |
|--|---|---|---|---|---|---|---|---|
|  | Name: _____<br>Title: _____<br>Race and Gender: _____<br>Percent Owned: _____ |   |   |   | Name: _____<br>Title: _____<br>Race and Gender: _____<br>Percent Owned: _____ |   |   |   |
| Sets policy for company direction/scope of operations                  | A   | F | S | N | A   | F | S | N |
| Bidding and estimating   | A   | F | S | N | A   | F | S | N |
| Major purchasing decisions   | A   | F | S | N | A   | F | S | N |
| Marketing and sales  | A   | F | S | N | A   | F | S | N |
| Supervises field operations  | A   | F | S | N | A   | F | S | N |
| Attend bid opening and lettings  | A   | F | S | N | A   | F | S | N |
| Perform office management (billing, accounts receivable/payable, etc.) | A   | F | S | N | A   | F | S | N |
| Hires and fires management staff                                       | A   | F | S | N | A   | F | S | N |
| Hire and fire field staff or crew                                      | A   | F | S | N | A   | F | S | N |
| Designates profits spending or investment                              | A   | F | S | N | A   | F | S | N |
| Obligates business by contract/credit                                  | A   | F | S | N | A   | F | S | N |
| Purchase equipment   | A   | F | S | N | A   | F | S | N |
| Signs business checks  | A   | F | S | N | A   | F | S | N |

Do any of the persons listed in B1 or B2 perform a management or supervisory function for any other business? If Yes, identify the person, the business, and their title/function: \_\_\_\_\_

Do any of the persons listed above own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.) If Yes, describe the nature of the business relationship: \_\_\_\_\_

**C. Inventory:** Indicate your firm's inventory in the following categories (Please attach additional sheets if needed):

**1. Equipment and Vehicles**

| Make and Model | Current Value | Owned or Leased by Firm or Owner? | Used as collateral? | Where is item stored? |
|----------------|---------------|-----------------------------------|---------------------|-----------------------|
| 1. _____       |               |                                   |                     |                       |
| 2. _____       |               |                                   |                     |                       |
| 3. _____       |               |                                   |                     |                       |
| 4. _____       |               |                                   |                     |                       |
| 5. _____       |               |                                   |                     |                       |
| 6. _____       |               |                                   |                     |                       |
| 7. _____       |               |                                   |                     |                       |
| 8. _____       |               |                                   |                     |                       |
| 9. _____       |               |                                   |                     |                       |

**2. Office Space**

| Street Address | Owned or Leased by Firm or Owner? | Current Value of Property or Lease |
|----------------|-----------------------------------|------------------------------------|
| _____          |                                   |                                    |
| _____          |                                   |                                    |
| _____          |                                   |                                    |



**3. Storage Space** *(Provide signed lease agreements for the properties listed)*

| Street Address | Owned or Leased by<br>Firm or Owner? | Current Value of Property or Lease |
|----------------|--------------------------------------|------------------------------------|
| _____          | _____                                | _____                              |
| _____          | _____                                | _____                              |

**D. Does your firm rely on any other firm for management functions or employee payroll?** ☐ Yes ☐ No

**E. Financial/Banking Information** *(Provide bank authorization and signature cards)*

Name of bank: \_\_\_\_\_ City and State: \_\_\_\_\_  
The following individuals are able to sign checks on this account: \_\_\_\_\_

Name of bank: \_\_\_\_\_ City and State: \_\_\_\_\_  
The following individuals are able to sign checks on this account: \_\_\_\_\_

**Bonding Information:** If you have bonding capacity, identify the firm's bonding aggregate and project limits:  
Aggregate limit \$ \_\_\_\_\_ Project limit \$ \_\_\_\_\_

**F. Identify all sources, amounts, and purposes of money loaned to your firm including from financial institutions. Identify whether you the owner and any other person or firm loaned money to the applicant DBE/ACDBE. Include the names of any persons or firms guaranteeing the loan, if other than the listed owner. (Provide copies of signed loan agreements and security agreements).**

| Name of Source | Address of Source | Name of Person<br>Guaranteeing the<br>Loan | Original<br>Amount | Current<br>Balance | Purpose of Loan |
|----------------|-------------------|--|--------------------|--------------------|-----------------|
| 1. _____       | _____             | _____                                      | _____              | _____              | _____           |
| 2. _____       | _____             | _____                                      | _____              | _____              | _____           |
| 3. _____       | _____             | _____                                      | _____              | _____              | _____           |

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners or another individual over the past two years (Attach additional sheets if needed):**

| Contribution/Asset | Dollar Value | From Whom<br>Transferred | To Whom<br>Transferred | Relationship | Date of<br>Transfer |
|--------------------|--------------|--------------------------|------------------------|--------------|---------------------|
| 1. _____           | _____        | _____                    | _____                  | _____        | _____               |
| 2. _____           | _____        | _____                    | _____                  | _____        | _____               |
| 3. _____           | _____        | _____                    | _____                  | _____        | _____               |

**H. List current licenses/permits held by any owner and/or employee of your firm**  
*(e.g. contractor, engineer, architect, etc.) (Attach additional sheets if needed):*

| Name of License/Permit Holder | Type of License/Permit | Expiration Date | State |
|-------------------------------|------------------------|-----------------|-------|
| 1. _____                      | _____                  | _____           | _____ |
| 2. _____                      | _____                  | _____           | _____ |
| 3. _____                      | _____                  | _____           | _____ |



I. List the three largest contracts completed by your firm in the past three years, if any:

| Name of Owner/Contractor | Name/Location of Project | Type of Work Performed | Dollar Value of Contract |
|--------------------------|--------------------------|------------------------|--------------------------|
| 1. _____                 | _____                    | _____                  | _____                    |
| 2. _____                 | _____                    | _____                  | _____                    |
| 3. _____                 | _____                    | _____                  | _____                    |

J. List the three largest active jobs on which your firm is currently working:

| Name of Prime Contractor and Project Number | Location of Project | Type of Work | Project Start Date | Anticipated Completion Date | Dollar Value of Contract |
|---|---------------------|--------------|--------------------|-----------------------------|--------------------------|
| 1. _____                                    | _____               | _____        | _____              | _____                       | _____                    |
| 2. _____                                    | _____               | _____        | _____              | _____                       | _____                    |
| 3. _____                                    | _____               | _____        | _____              | _____                       | _____                    |

**AIRPORT CONCESSION (ACDBE) APPLICANTS ONLY MUST COMPLETE THIS SECTION**

Identify the following information concerning the ACDBE applicant firm:

| <u>Concession Space</u> | <u>Address / Location at Airport</u> | <u>Value of Property or Lease</u> | <u>Fees/Lease Payments Paid to the Airport</u> |
|-------------------------|--------------------------------------|-----------------------------------|--|
|                         |                                      |                                   |  |
|                         |                                      |                                   |  |
|                         |                                      |                                   |  |

Provide information concerning any other airport concession businesses the applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of concession

| <u>Name of Concession</u> | <u>Location</u> | <u>Type of Concession</u> | <u>Start Date of Concession</u> |
|---------------------------|-----------------|---------------------------|---------------------------------|
|                           |                 |                           |                                 |
|                           |                 |                           |                                 |
|                           |                 |                           |                                 |





## AFFIDAVIT OF CERTIFICATION

*This form must be signed and notarized for each owner upon which disadvantaged status is relied.*

**A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed),  
swear or affirm under penalty of law that I am  
\_\_\_\_\_ (title) of the applicant firm  
\_\_\_\_\_ and that I

have read and understood all of the questions in this application and 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 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, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract, subcontract, concession lease or sublease, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certification Program of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership changes, address/telephone number, personal net worth exceeding \$1.32 million, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; 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 certify that I am a socially and economically disadvantaged individual who is an owner of the above-referenced firm seeking certification as a Disadvantaged Business Enterprise or Airport Concession Disadvantaged Business Enterprise. 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): (Check all that apply):

- ☐ Female   ☐ Black American   ☐ Hispanic American  
☐ Native American   ☐ Asian-Pacific American  
☐ Subcontinent Asian American   ☐ Other (specify) \_\_\_\_\_

I certify that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified above, without regard to my individual qualities.

I further certify that my personal net worth does not exceed \$1.32 million, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I declare under penalty of perjury that the information provided in this application and supporting documents is true and correct.

Signature \_\_\_\_\_ (DBE/ACDBE Applicant)      \_\_\_\_\_ (Date)

### NOTARY CERTIFICATE



## UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST

In order to complete your application for DBE or ACDBE certification, you must attach copies of all of the following **REQUIRED** documents. A failure to supply any information requested by the UCP may result in your firm denied DBE/ACDBE certification.

### Required Documents for All Applicants

- ☐ Résumés (that include places of employment with corresponding dates), for all owners, officers, and key personnel of the applicant firm
- ☐ Personal Net Worth Statement for each socially and economically disadvantaged owners comprising 51% or more of the ownership percentage of the applicant firm.
- ☐ Personal Federal tax returns for the past 3 years, if applicable, for each disadvantaged owner
- ☐ Federal tax returns (and requests for extensions) filed by the firm and its affiliates with related schedules, for the past 3 years.
- ☐ Documented proof of contributions used to acquire ownership for each owner (*e.g., both sides of cancelled checks*)
- ☐ Signed loan and security agreements, and bonding forms
- ☐ List of equipment and/or vehicles owned and leased including VIN numbers, copy of titles, proof of ownership, insurance cards for each vehicle.
- ☐ Title(s), registration certificate(s), and U.S. DOT numbers for each truck owned or operated by your firm
- ☐ Licenses, license renewal forms, permits, and haul authority forms
- ☐ Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- ☐ Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past 2 years
- ☐ DBE/ACDBE and SBA 8(a), SDB, MBE/WBE certifications, denials, and/or decertifications, if applicable; and any U.S. DOT appeal decisions on these actions.
- ☐ Bank authorization and signatory cards
- ☐ Schedule of salaries (or other remuneration) paid to all officers, managers, owners, and/or directors of the firm
- ☐ List of all employees, job titles, and dates of employment.
- ☐ Proof of warehouse/storage facility ownership or lease arrangements

### Partnership or Joint Venture

- ☐ Original and any amended Partnership or Joint Venture Agreements

### Corporation or LLC

- ☐ Official Articles of Incorporation (*signed by the state official*)
- ☐ Both sides of all corporate stock certificates and your firm's stock transfer ledger
- ☐ Shareholders' Agreement(s)
- ☐ Minutes of all stockholders and board of directors meetings

- ☐ Corporate by-laws and any amendments
- ☐ Corporate bank resolution and bank signature cards
- ☐ Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

### Optional Documents to Be Provided on Request

*The UCP to which you are applying may require the submission of the following documents. If requested to provide these document, you must supply them with your application or at the on-site visit.*

- ☐ Proof of citizenship
- ☐ Insurance agreements for each truck owned or operated by your firm
- ☐ Audited financial statements (if available)
- ☐ Personal Federal Tax returns for the past 3 years, if applicable, for other disadvantaged owners of the firm.
- ☐ Trust agreements held by any owner claiming disadvantaged status
- ☐ Year-end balance sheets and income statements for the past 3 years (*or life of firm, if less than three years*)

### Suppliers

- ☐ List of product lines carried and list of distribution equipment owned and/or leased

**Uniform Certification Application**  
For DBE/ACDBE Program Eligibility

For Puerto Rico Use Only:

**NOTARY CERTIFICATE**

\_\_\_\_\_  
Signature DBE/ACDBE Owner

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

\_\_\_\_\_  
Name Print DBE/ACDBE OWNER

AFFIDAVIT NO. \_\_\_\_\_

SWORN and subscribed before me by \_\_\_\_\_, of legal age,  
Name

\_\_\_\_\_, Resident of  
marital status Occupation

\_\_\_\_\_, known to me personally or whom I have identified by

means of \_\_\_\_\_.  
Indicate Id. # of/government issued Id.

In \_\_\_\_\_, Puerto Rico, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public



U.S. Department of  
Transportation

**Personal Net Worth Statement  
For DBE/ACDBE Program Eligibility**

As of \_\_\_\_\_

OMB APPROVAL NO:  
EXPIRATION DATE:

This form is used by all participants in the U.S. Department of Transportation's Disadvantaged Business Enterprise (DBE) Programs. Each individual owner of a firm applying to participate as a DBE or ACDBE, whose ownership and control are relied upon for DBE certification must complete this form. Each person signing this form authorizes the Unified Certification Program (UCP) recipient to make inquiries as necessary to verify the accuracy of the statements made. The agency you apply to will use the information provided to determine whether an owner is economically disadvantaged as defined in the DBE program regulations 49 C.F.R. Parts 23 and 26. **Return form to appropriate UCP certifying member, not U.S. DOT.**

|  |  |                 |
|--|--|-----------------|
| Name   |  | Business Phone  |
| Residence Address (As reported to the IRS)<br>City, State and Zip Code   |  | Residence Phone |
| Business Name of Applicant Firm  |  |                 |
| Spouse's Full Name<br>(Marital Status: Single, Married, Divorced, Union) |  |                 |

| ASSETS  |    | LIABILITIES  |    |
|---|----|--|----|
| (Omit Cents)  |    | (Omit Cents)   |    |
| Cash and Cash Equivalents   | \$ | Loan on Life Insurance<br>(Complete Section 5)                                       | \$ |
| Retirement Accounts (IRAs, 401Ks, 403Bs,<br>Pensions, etc.) (Report full value minus tax and<br>interest penalties that would apply if assets were<br>distributed today) (Complete Section 3) | \$ | Mortgages on Real Estate<br>Excluding Primary Residence Debt<br>(Complete Section 4) | \$ |
| Brokerage, Investment Accounts  | \$ | Notes, Obligations on Personal Property<br>(Complete Section 6)                      | \$ |
| Assets Held in Trust  | \$ | Notes & Accounts Payable to Banks<br>and Others (Complete Section 2)                 | \$ |
| Loans to Shareholders & Other Receivables<br>(Complete section 6)   | \$ | Other Liabilities<br>(Complete Section 8)  | \$ |
| Real Estate Excluding Primary Residence<br>(Complete Section 4)   | \$ | Unpaid Taxes<br>(Complete Section 8)   | \$ |
| Life Insurance (Cash Surrender Value Only)<br>(Complete Section 5)  | \$ |  |    |
| Other Personal Property and Assets<br>(Complete Section 6)  | \$ |  |    |
| Business Interests Other Than the Applicant Firm<br>(Complete Section 7)  | \$ |  |    |
| Total Assets  | \$ | Total Liabilities  | \$ |
|   |    | <b>NET WORTH</b>   |    |

**Section 2. Notes Payable to Banks and Others**

| Name of Noteholder(s) | Original<br>Balance | Current<br>Balance | Payment<br>Amount | Frequency<br>(monthly, etc.) | How Secured or Endorsed Type of<br>Collateral |
|-----------------------|---------------------|--------------------|-------------------|------------------------------|---|
|                       |                     |                    |                   |                              |   |
|                       |                     |                    |                   |                              |   |
|                       |                     |                    |                   |                              |   |
|                       |                     |                    |                   |                              |   |
|                       |                     |                    |                   |                              |   |

| Section 3. Brokerage and custodial accounts, stocks, bonds, retirement accounts. (Full Value) (Use attachments if necessary). |      |                                 |                            |             |
|---|------|---------------------------------|----------------------------|-------------|
| Name of Security / Brokerage Account / Retirement Account   | Cost | Market Value Quotation/Exchange | Date of Quotation/Exchange | Total Value |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |
|   |      |                                 |                            |             |

| Section 4. Real Estate Owned (Including Primary Residence, Investment Properties, Personal Property Leased or Rented for Business Purposes, Farm Properties, or any Other Income Producing property). (List each parcel separately. Add additional sheets if necessary). |                   |            |            |
|--|-------------------|------------|------------|
|  | Primary Residence | Property B | Property C |
| Type of Property   |                   |            |            |
| Address  |                   |            |            |
| Date Acquired and Method of Acquisition (purchase, inherit, divorce, gift, etc.)   |                   |            |            |
| Names on Deed  |                   |            |            |
| Purchase Price   |                   |            |            |
| Present Market Value   |                   |            |            |
| Source of Market Valuation   |                   |            |            |
| Name of all Mortgage Holders   |                   |            |            |
| Mortgage Acc. # and balance (as of date of form)   |                   |            |            |
| Equity line of credit balance  |                   |            |            |
| Amount of Payment Per Month/Year (Specify)   |                   |            |            |

| Section 5. Life Insurance Held (Give face amount and cash surrender value of policies, name of insurance company and beneficiaries). |            |                       |               |                            |
|--|------------|-----------------------|---------------|----------------------------|
| Insurance Company  | Face Value | Cash Surrender Amount | Beneficiaries | Loan on Policy Information |
|  |            |                       |               |                            |
|  |            |                       |               |                            |
|  |            |                       |               |                            |

| Section 6. Other Personal Property and Assets (Use attachments as necessary)   |                     |                               |                        |  |
|--|---------------------|-------------------------------|------------------------|--|
| Type of Property or Asset  | Total Present Value | Amount of Liability (Balance) | Is this asset insured? | Lien or Note amount and Terms of Payment |
| Automobiles and Vehicles (including recreation vehicles, motorcycles, boats, etc.) Include personally owned vehicles that are leased or rented to businesses or other individuals. |                     |                               |                        |  |
|  |                     |                               |                        |  |
|  |                     |                               |                        |  |
| Household Goods / Jewelry  |                     |                               |                        |  |
|  |                     |                               |                        |  |
|  |                     |                               |                        |  |
| Other (List)   |                     |                               |                        |  |
|  |                     |                               |                        |  |
|  |                     |                               |                        |  |
| Accounts and Notes Receivables   |                     |                               |                        |  |

**Section 7. Value of Other Business Investments, Other Businesses Owned (excluding applicant firm)**  
Sole Proprietorships, General Partners, Joint Ventures, Limited Liability Companies, Closely-held and Public Traded Corporations

**Section 8. Other Liabilities and Unpaid Taxes (Describe)**

**Section 9. Transfer of Assets:** Have you within 2 years of this personal net worth statement, transferred assets to a spouse, domestic partner, relative, or entity in which you have an ownership or beneficial interest including a trust? Yes ☐ No ☐ If yes, describe.

I declare under penalty of perjury that the information provided in this personal net worth statement and supporting documents is complete, true and correct. I certify that no assets have been transferred to any beneficiary for less than fair market value in the last two years. 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 and this personal net worth statement, and I authorize such agency to contact any entity named in the application or this personal financial statement, including the names banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility. I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; 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.

**NOTARY CERTIFICATE:**  
(Insert applicable state acknowledgment, affirmation, or oath)

\_\_\_\_\_  
Signature (DBE/ACDBE Owner)

\_\_\_\_\_  
Date

In collecting the information requested by this form, the Department of Transportation complies with Federal Freedom of Information and Privacy Act (5 U.S.C. 552 and 552a) provisions. The Privacy Act provides comprehensive protections for your personal information. This includes how information is collected, used, disclosed, stored, and discarded. Your information will not be disclosed to third parties without your consent. The information collected will be used solely to determine your firm's eligibility to participate in the Disadvantaged Business Enterprise (DBE) Program or Airport Concessionaire DBE Programs as defined in 49 C.F.R. Parts 23 and 26. You may review DOT's complete Privacy Act Statement in the Federal Register published on April 11, 2000 (65 FR 19477).





## General Instructions for Completing the Personal Net Worth Statement for DBE/ACDBE Program Eligibility

Please do not make adjustments to your figures pursuant to U.S. DOT regulations 49 C.F.R. Parts 23 and 26. The agency that you apply to will use the information provided on your completed Personal Net Worth (PNW) Statement to determine whether you meet the economic disadvantage requirements of 49 C.F.R. Parts 23 and 26. If there are discrepancies or questions regarding your form, it may be returned to you to correct and complete again.

An individual's personal net worth according to 49 C.F.R. Parts 23 and 26 includes only his or her own share of assets held separately, jointly, or as community property with the individual's spouse and excludes the following:

- Individual's ownership interest in the applicant firm;
- Individual's equity in his or her primary residence;
- Tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.

Indicate on the form, if any items are jointly owned. If the personal net worth of the majority owner(s) of the firm exceeds \$1.32 million, as defined by 49 C.F.R. Parts 23 and 26, the firm is not eligible for DBE or ACDBE certification. If the personal net worth of the majority owner(s) exceeds the \$1.32 million cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise that your firm no longer qualifies as a DBE or ACDBE. You must fill out all line items on the Personal Net Worth Statement.

If necessary, use additional sheets of paper to report all information and details. If you have any questions about completing this form, please contact one of the UCP certifying agencies.

### Assets

All assets must be reported at their current fair market values as of the date of your statement. *Assessor's assessed value for real estate, for example, is not acceptable.* Assets held in a trust should be included.

**Cash and Cash Equivalents:** On page 1, enter the total amount of cash or cash equivalents in bank accounts, including checking, savings, money market, certificates of deposit held domestic or foreign. Provide copies of the bank statement.

**Retirement Accounts, IRA, 401Ks, 403Bs, Pensions:** On page 1, enter the full value minus tax and interest penalties that would apply if assets were distributed as of the date of the form. Describe the number of shares, name of securities, cost market value, date of quotation, and total value in section 3 on page 2.

**Brokerage and Custodial Accounts, Stocks, Bonds, Retirement Accounts:** Report total value on page 1, and on page 2, section 3, enter the name of the security, brokerage account, retirement account, etc.; the cost; market value of the asset; the date of quotation; and total value as of the date of the PNW statement.

**Assets Held in Trust:** Enter the total value of the assets held in trust on page 1, and provide the names of beneficiaries and trustees, and other information in Section 6 on page 3.

**Loans to Shareholders and Other Receivables not listed:** Enter amounts loaned to you from your firm, from any other business entity in which you hold an ownership interest, and other receivables not listed above. Complete Section 6 on page 3.

**Real Estate:** The total value of real estate excluding your primary residence should be listed on page 1. In section 4 on page 2, please list your primary residence in column 1, including the address, method of acquisition, date of acquired, names of deed, purchase price, present fair market value, source of market valuation, names of all mortgage holders, mortgage account number and balance, equity line of credit balance, and amount of payment. List this information for all real estate held. Please ensure that this section contains all real estate owned, including rental properties, vacation properties, commercial properties, personal property leased or rented for business purposes, farm properties and any other income producing properties, etc. Attach additional sheets if needed.

**Life Insurance:** On page 1, enter the cash surrender value of this asset. In section 5 on page 2, enter the name of the insurance company, the face value of the policy, cash surrender value, beneficiary names, and loans on the policy.

**Other Personal Property and Assets:** Enter the total value of personal property and assets you own on page 1. Personal property includes motor vehicles, boats, trailers, jewelry, furniture, household goods, collectibles, clothing, and personally owned vehicles that are leased or rented to businesses or other individuals. In section 6 on page 3, list these assets and enter the present value, the balance of any liabilities, whether the asset is insured, and lien or note information and terms of payments. For accounts and notes receivable, enter the total value of all monies owed to you personally, if any. This should include shareholder loans to the applicant firm, if those exist. If the asset is insured, you may be asked to provide a copy of the policy. You may also be asked to provide a copy of any liens or notes on the property.

**Other Business Interests Other than Applicant Firm:** On page 1, enter the total value of your other business investments (excluding the applicant firm). In section 7 on page 3, enter information concerning the businesses you

hold an ownership interest in, such as sole proprietorships, partnerships, joint ventures, corporations, or limited liability corporations (other than the applicant firm). Do not reduce the value of these entries by any loans from the outside firm to the DBE/ACDBE applicant business.

#### **Liabilities**

**Mortgages on Real Estate:** Enter the total balance on all mortgages payable on real estate on page 1.

**Loans on Life Insurance:** Enter the total value of all loans due on life insurance policies on page 1, and complete section 5 on page 2.

**Notes & Accounts Payable to Bank and Others:** On page 1, section 2, enter details concerning any liability, including name of noteholders, original and current balances, payment terms, and security/collateral information. The entries should include automobile installment accounts. This should not, however, include any mortgage balances as this information is captured in section 4. Do not include loans for your business or mortgages for your properties in this section. You may be asked to submit copy of note/security agreement, and the most recent account statement.

**Other Liabilities:** On page 1, enter the total value due on all other liabilities not listed in the previous entries. In section 8, page 3, report the name of the individual obligated, names of co-signers, description of the liability, the name of the entity owed, the date of the obligation, payment amounts and terms. Note: Do not include contingent liabilities in this section. Contingent liabilities are liabilities that belong to you only if an event(s) should occur. For example, if you

have co-signed on a relative's loan, but you are not responsible for the debt until your relative defaults, that is a contingent liability. Contingent liabilities do not count toward your net worth until they become actual liabilities.

**Unpaid Taxes:** Enter the total amount of all taxes that are currently due, but are unpaid on page 1, and complete section 8 on page 3. Contingent tax liabilities or anticipated taxes for current year should not be included. Describe in detail the name of the individual obligated, names of co-signers, the type of unpaid tax, to whom the tax is payable, due date, amount, and to what property, if any, the tax lien attaches. If none, state "NONE." You must include documentation, such as tax liens, to support the amounts.

#### **Transfers of Assets:**

**Transfers of Assets:** If you checked the box indicating yes on page 3 in this category, provide details on all asset transfers (within 2 years of the date of this personal net worth statement) to a spouse, domestic partner, relative, or entity in which you have an ownership or beneficial interest including a trust. Include a description of the asset; names of individuals on the deed, title, note or other instrument indicating ownership rights; the names of individuals receiving the assets and their relation to the transferor; the date of the transfer; and the value or consideration received. Submit documentation requested on the form related to the transfer.

#### **Affidavit**

Be sure to sign and date the statement. The Personal Net Worth Statement must be notarized



Personal Net Worth Statement  
For DBE/ACDBE Program Eligibility

For Puerto Rico Use Only:

NOTARY CERTIFICATE

\_\_\_\_\_  
Signature DBE/ACDBE Owner

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

\_\_\_\_\_  
Name Print DBE/ACDBE OWNER

AFFIDAVIT NO. \_\_\_\_\_

SWORN and subscribed before me by \_\_\_\_\_, of legal age,  
Name

\_\_\_\_\_, Resident of  
marital status Occupation

\_\_\_\_\_, known to me personally or whom I have identified by

means of \_\_\_\_\_.  
Indicate Id. # of/government issued Id.

In \_\_\_\_\_, Puerto Rico, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

## ATTACHMENT 8

### PROCEDURES FOR REMOVAL OF ACDBEs ELIGIBILITY

Aerostar use the ACDBEs certified by the Puerto Rico Certification Program (PRUCP). The PRPA is responsible of certify all the ACDBE for the Luis Muñoz Marín International Airport. The PRUCP meets the requirements of this section. The Uniform Certification Application is available in Attachment 7.

In instances when the eligibility of a concessionaire is removed after the concessionaire has entered into a concession agreement because the firm exceeded the size standard or the owner has exceeded the personal net worth (PNW) standard, and the firm in all other respects remains an eligible Disadvantaged Business Enterprise (DBE), Aerostar may continue to count the concessionaire's participation toward ACDBE goals during the remainder of the current concession agreement. Aerostar will not count the concessionaire's participation toward ACDBE goals beyond the termination date for the concession agreement in effect at the time of the decertification. (23.39(e))

In instances when the eligibility of an ACDBE is placed in a decertification process as not being owned, operated and controlled by a member of the presumptive group and the UCP findings concur, then the ACDBE will be removed from UCP database and be prohibited from being counted as an ACDBE. The ACDBE will then have the options of a hearing and appealing directly to the United States Department of Transportation (USDOT).

Aerostar reserves the right to decline to recognize and count the participation of an ACDBE toward the ACDBE goal.

## ATTACHMENT 9

### Regulations: 49 CFR Part 23 (website link)

<https://www.ecfr.gov/cgi-bin/text-idx?SID=2f995e7709399434add8724b2d7a71c1&mc=true&node=pt49.1.23&rgn=div5>