Birmingham Construction Industry Authority

Personal Net Worth Statement for MBE/DBE Program Eligibility

As of _____

This form is used by all participants in the BCIA MBE/DBE Certification Program. Each individual owner of a firm applying to participate as an MBE or DBE whose ownership and control are relied upon for MBE/DBE Certification must complete this form. Each person signing this form authorizes Birmingham Construction Industry Authority (BCIA) to make inquiries as necessary to verify the accuracy of the statements made. The BCIA will use this information provided to determine whether an owner is economically disadvantaged as defined in the BCIA Certification Guidelines.

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Name			Business Phone
Residence Address (As reported to the IRS)			Residence Phone
City, State and Zip Code			
Business Name of Applicant Firm			
Spouse's Full Name (Marital Status: Single, Married, Divorced, Union)			
ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash and Cash Equivalents	\$	Loan of Life Insurance (Complete Section 5)	\$
Retirement Accounts (IRAs, 401Ks, 403Bs, Pensions, etc.) Report Full	\$	Mortgages on Real Estate Excluding	
Value minus tax and interest penalties that would apply if assets were		Primary Residence Debt	
distributed today)(Complete Section 3)		(Complete Section 6)	\$
Brokerage, Investment Accounts		Note, Obligations on Personal Property	
	\$	(Complete Section 6)	\$
Assets Held in Trust		Notes & Accounts Payable to Banks and	
	\$	Others (Complete Section 2)	
Loans to Shareholders & Other Receivables (Complete section 6)	\$	Other Liabilities (Complete Section 8)	\$
Real Estate Excluding Primary Residence (Complete Section 4)	\$	Unpaid Taxes (Complete Section 8)	\$
Life Insurance (Cash Surrender Value Only)(Complete Section 5)	\$		
Other Personal Property and Assets (Complete Section 6)	\$		
Business Interests Other Than the Applicant Firm (Complete Section 7)	\$		
Total Assets	\$	Total Liabilities	\$

Section2. Notes Payable to Banks and Others								
	Original	Current	Payment	Frequency	How Secu	ured or Endorsed Type of		
Name of Noteholder(s)	Balance	Balance	Amount	(monthly, etc.)	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 F	Properties, P	ersonal Pro	perty Lease	d or Rented for	Business Purp	oses, Farm Properties, or		
any Other Income Producing property. (List Each parcel separately. Add a								
	Primary F	Residence Pro		operty B		Property C		
Type of Property				. ,		. ,		
Address								
Date Acquired and Method of Acquisition (purchase, inherit, divorce, gift, etc.)								
Names on Deed								
Purchase Price								
Source of Market Valuation								
Name of all Mortgage Holders								
Mortgages Acct. # and balance (as of date of form)								
Equity line of credit balance								
Amount of Payment Per Month/Year (Specify)								
Amount of Layment Let Monthly real (Spechy)								

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Section 5. Insurance Held (Give face amount and cash surrender values 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 Assets	Total Present Value	Amount of Liability (Balance)	Is this asset insured?	Lien or Note amount and Terms of Payment				
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)								

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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. I authorize such agency to contact any entity named in the application or 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 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 rewarded; 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.

Signature (MBE/DBE Owner)

Date

NOTARY CERTIFICATION

(Insert applicable acknowledgement, affirmation, or oath)