

Tennessee Uniform Certification Program (TNUCP)

Interstate Certification Process

Your firm must be currently certified as a Disadvantaged Business Enterprise (DBE) or Airport Concession Disadvantaged Business Enterprise (ACDBE) pursuant to 49 Code of Federal Regulations Part 23 or 26 in your home state before you can apply to the TNUCP. Pursuant to 49 CFR § 26.85(c), the firm's owner(s) acknowledge and agree to comply with the following regulations:

- 1) *You must provide to the TNUCP a complete copy of the application form, all supporting documents, and any other information you have submitted to your home state or any other state related to your firm's certification. This includes affidavits of no change (see §26.83(j)) and any notices of changes (see §26.83(i)) that you have submitted to your home state, as well as any correspondence you have had with your home state's UCP or any other recipient concerning your application or status as a **DBE** firm.*
- 2) *You must also provide to the TNUCP any notices or correspondence from states other than your home state relating to your status as an applicant or certified **DBE** in those states. For example, if you have been denied certification or decertified by a state UCP other than your home state, or subject to a decertification action there, you must inform the TNUCP of this fact and provide all documentation concerning this action to the TNUCP.*
- 3) *If you have filed a certification appeal with the U.S. Department of Transportation (DOT) (see §26.89), you must inform the TNUCP of the fact and provide your letter of appeal and DOT's response to the TNUCP.*
- 4) *You must submit an affidavit sworn to by the firm's owners before a person who is authorized by State law to administer oaths or an unsworn declaration executed under penalty of perjury of the laws of the United States.*
 - i. *This affidavit must affirm that you have submitted all the information required by 49 CFR 26.85(c) and the information is complete and, in the case of the information required by §26.85(c)(1), is an identical copy of the information submitted to your home state.*
 - ii. *If the on-site report from your home state supporting your certification from your home state is more than three years old, as of the date of your application to the TNUCP, the TNUCP may require that your affidavit also affirm that the facts in the on-site report remain true and correct.*

Application Submission Checklist:

- Complete DBE/ACDBE application/supporting documents**
- Notices/Correspondences from other states regarding applicant/certified DBE status**
- Letter of USDOT Appeal/Response, as applicable**
- Completed Affidavit of Certification**

**Submit complete application via email to:
David.Neese@tn.gov**

We are no longer accepting paper applications

Tennessee Uniform Certification Program (TNUCP)

Member Agencies

Tennessee Department
of Transportation

Metropolitan Knoxville
Airport Authority

Chattanooga Metropolitan
Airport Authority

Memphis Shelby County
Airport Authority

Metropolitan Nashville
Airport Authority

Chattanooga Area Regional
Transportation Authority

Memphis Area
Transit Authority

Jackson Transit Authority

Smyrna Airport Authority

Tri-Cities Airport Commission

Clarksville Transit System

Regional Transportation
Authority [Middle TN]

Nashville Metropolitan
Transit Authority

Knoxville Area Transit

Jackson Airport Authority

Johnson City Transit

Bristol Tennessee Transit

Murfreesboro Rover
Public Transit

Kingsport Area Transit Service

AFFIDAVIT OF CERTIFICATION

{This form must be signed by the owner(s) 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 applicant firm _____ (firm name) and declare under penalty of perjury that the accompanying application package and documentation is identical to that provided to my state unified certification program. I further affirm that the information gathered by my state unified certification program during its on-site review remains true and correct. I recognize that the information submitted in this application and accompanying documentation is for the purpose of obtaining 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 my home state 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 further understand that I may be required to provide additional information and documentation not previously submitted, including but not limited to updated tax returns, business and personal financial information, and changes affecting ownership and control.

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.

I declare under penalty of perjury of the laws of the United States that I have submitted all the information required by 49 CFR 26.85(c) and the information is complete and, in the case of the information required by § 26.85(c)(1), is an identical copy of the information submitted to my home state.

Executed on _____ (Date)

Signature _____
(DBE/ACDBE Applicant)