Attachment 5

Business Declaration Form

DTFAEN-11-R-00105

EXTERIOR PAINTING OF BUILDINGS

AT

THE JACKSONVILLE AIR ROUTE TRAFFIC CONTROL CENTER (ARTCC) (CONTROL WING, AUTOMATION WING, AUXILIARY SUPPORT BUILDING AND POWER SERVICE BUILDING)

HILLIARD, FLORIDA

BUSINESS DECLARATION

1. Name of Firm: _____ Tax Identification No.: _____

2. Address of Firm: _____

3. Telephone Number of Firm: _____

4. a. Name of Person Making Declaration _____

   b. Telephone Number of Person Making Declaration _____

   c. Position Held in the Company _____

5. Controlling Interest in Company *("X" all appropriate boxes)*

   ☐ a. Black American ☐ b. Hispanic American ☐ c. Native American ☐ d. Asian American

   ☐ e. Other Minority *(Specify)* _____ ☐ f. Other *(Specify)* _____

   ☐ g. Female ☐ h. Male ☐ i. 8(a) Certified *(Certification letter attached)* ☐ j. Service Disabled Veteran Small Business

6. Is the person identified in Number 4 above, responsible for day-to-day management and policy decision making, including but not limited to financial and management decisions?

   ☐ a. Yes ☐ b. No *(If "NO," provide the name and telephone number of the person who has this authority.)*

   _____

7. Nature of Business *(Specify major services/products (NAIC))* _____

8. (a) Years the firm has been in business: _____ (b) No. of Employees _____

9. Type of Ownership: ☐ a. Sole Ownership ☐ b. Partnership

   ☐ c. Other *(Explain)* _____

10. Gross receipts of the firm for the last three years:

    a.1. Year Ending: _____ b.1. Gross Receipts _____

    a.2. Year Ending: _____ b.2. Gross Receipts _____ a.3. Year Ending: _____ b.3. Gross Receipts _____

11. Is the firm a small business? ☐ a. Yes ☐ b. No

I DECLARE THAT THE FOREGOING STATEMENTS CONCERNING _____ ***ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF. I AM AWARE THAT I AM SUBJECT TO CRIMINAL PROSECUTION UNDER THE PROVISIONS OF 18 USCS 1001.***

12. a. Signature _____ b. Date: _____

    c. Typed Name _____ d. Title: _____