



Shoshone-Bannock Tribes  
 TERO  
 PO Box 306  
 Fort Hall, ID 83203  
 (208) 478-3848 phone  
 (208) 478-3756 fax

## TERO Indian Preference Certification Application Schedule

<i>Application Period</i>	<i>Quarterly Deadline – specified at 4:00 p.m. MST</i>	<i>Review Date</i>
October 1 – December 31, 2009	<b>January 1, 2010</b>	January 28, 2010
January 1– March 31, 2010	<b>April 2, 2010</b>	April 22, 2010
April 1 – June 30, 2010	<b>July 1, 2010</b>	July 22, 2010
July 1 – September 30, 2010	<b>October 1, 2010</b>	October 28, 2010

Upon the Quarterly Deadline, all received TERO Indian Preference Contractor applications will be reviewed for completeness. Once determined complete, a public announcement shall be posted to inform the public of a firm’s intention to qualify for TERO Indian Preference Certification. Said announcement shall be posted until the Review Date set by the TERO Commission following the schedule listed above.

In addition, any party wishing to present information to the TERO Commission regarding a firm’s application, shall be entitled to do so, by requesting in writing and submitted to the TERO Commission Chairman no less than one (1) day prior, seeking approval to participate. Such approval shall be granted by the TERO Commission.

*Per TERO Ordinance, Section 4.3 Certification Procedures.*

*This information may be found on the internet at:*  
<http://www.shoshonebannocktribes.com/tero/main.html>  
*Click on the TERO link where all TERO forms may be accessed.*



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## TERO Indian Preference Certification Application

### INSTRUCTIONS

Complete this application entirely. Only complete applications will be reviewed by the TERO Commission. Please provide an original and three (3) copies of your application with all attachments to the TERO Office by the Quarterly Deadline.

### FEES

Level I Certification requires a \$100 processing fee; Level II Certification requires a \$25 processing fee. Only Cashier's Checks and Money Orders will be accepted. Make payable to: Sho-Ban TERO.

<b>Business Name</b>	<b>Owner</b> (attach Certificate of Indian Blood or Tribal ID to document Native American status)
<b>Mailing Address</b>	<b>Physical Address</b>
<b>Email Address</b>	<b>Web Address</b>
<b>Telephone</b>	<b>Fax</b>
<b>SSN or Federal ID#</b>	<b>Year Business Established</b>
<b>Other Name under which the business has previously operated</b> (provide former address and inclusive dates of operation):	<b>Has your business ever been granted TERO Certification status?</b> ___ Yes ___ No  If yes, under what name and year certified?
<b>What Level of TERO Certification are you seeking?</b>  ___ Level I – Partnerships, Corporations, Limited Liability Companies  ___ Level II – Sole-proprietorships and Non-profits	
<b>Do you possess a Shoshone-Bannock Tribal Business License?</b>  ___ Yes ___ No If yes, please attach.	<b>Are you registered with the State of Idaho, in compliance with the Contractor Registration Act?</b>  ___ Yes ___ No ___ Not Required If yes, please attach.
<b>Does the Indian owner(s) qualify as a military service disabled veteran?</b> ___ Yes ___ No If yes, provide verification from the U.S. Veterans Administration.	

<p><b>Identify your business' legal structure and attach requisite documentation as identified by codes:</b></p> <p><input type="checkbox"/> Sole-Proprietorship – 1</p> <p><input type="checkbox"/> Partnership – 2</p> <p><input type="checkbox"/> Corporation – 3</p> <p><input type="checkbox"/> Limited Liability Company – 4</p> <p><input type="checkbox"/> Non-Profit - 5</p>	<p><b>Codes:</b></p> <p>1 – Attach a copy of Certificate of Assumed Business Name</p> <p>2 – Attach copies of Partnership Agreement and Certificate of Assumed Business Name</p> <p>3 – Attach copies of Certificate of Incorporation, Articles of Incorporation, By laws and Amendments, Stock or Share Certificates, Board Meeting and/or Share Holder Minutes</p> <p>4 – Attach a copy of the LLC Operating Agreement and LLC Certificate of Registration</p> <p>5 – Attach a copy of 501(c)3 Certification and related documents</p>
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**Organizational Chart/Management System** (attach a company flow chart, for employees in excess of 3)

Name	Title	% of Ownership	Race

<p><b>Identify Type of Business and General Scope of Work:</b></p> <p><input type="checkbox"/> Supplies    <input type="checkbox"/> Materials</p> <p><input type="checkbox"/> Services    <input type="checkbox"/> Other, specify:</p> <p><input type="checkbox"/> Labor</p>	<p><b>List Specialties of Work</b> (i.e., specialty contractor, vendor, consultant, manufacturer, supplier, general contractor, etc.)</p>
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**Provide evidence to support you or your firm's Technical Qualifications** (attach copies of all that apply)

Certifications/Credentials                       Specialty Licenses or Licensures

Training or Educational Attainment                       Business Resume – documenting past work history, Major contracts or awards

Public Works License

**Insurance/Bond Coverage** (attach verification of bonding and/or proof of carrier for insurance)

Amount of Coverage: \_\_\_\_\_ Bond/Insurance Carrier: \_\_\_\_\_

**Resources for Capital and Equipment** (attach copies of these required documents)

Most recent Financial Statement

Tax Forms 1120, 1120S, 2554, 1065, 1040 and/or Schedule K-1 for each owner, for the past three years, as they apply.

Itemized Inventory List with true or approximate market values

**List major work-related equipment owned or leased by firm** (attach additional sheets as necessary)

Type of Equipment	Owned or Leased	Date of Purchase or Lease	Purchase or Lease Cost

**Location of Inventory Control – identify physical location of storage and equipment, with city, state, zip:**

**Business Profile** - Each application for TERO Indian Preference Certification must include a Business Profile. The format is identified below. Please submit a separate attachment, two-page maximum in length.

Business Description

Detail a brief description of when the business was founded, identify legal structure, and describe the nature of the business including areas of specialty.

Ownership & Management Profile

List name, address, education, experience level, and position within the company for each owner and/or key manager.

Business Location

Identify business headquarter location, as well as independent or satellite office locations.

Key Initiatives and Objectives

Identify business goals & methods to achieve.

Marketing Opportunities

Identify target market & strategies.

Competitive Advantages

Identify experience & expertise of the business.

**ACKNOWLEDGEMENT**

*I hereby certify that the information provided in this application is true and complete to the best of my knowledge and belief. I understand that applications for certification shall be reviewed on a quarterly schedule and acknowledge that any certification awarded will be re-evaluated two years from the date issue.*

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date



## Application Checklist Required Attachments

Please use this checklist to complete your TERO Indian Preference Certification Application.

- Certificate of Indian Blood or Tribal Identification Card for each Indian owner
- Shoshone-Bannock Tribal Business License
- Idaho Contractor Registration License
- Verification of Military Service Disabled Veteran Status
- Legal Structure Documents (one of the following must be checked and documents submitted)
  - Sole-Proprietor*: Certificate of Assumed Business Name
  - Partnership*: Partnership Agreement and Certificate of Assumed Business Name
  - Corporation*: Certificate of Incorporation, Articles of Incorporation, By laws and Amendments, Stock or Share Certificates, Board Meeting and/or Share Holder Minutes
  - Limited Liability Company*: LLC Operating Agreement and LLC Certificate of Registration
  - Non-Profit*: 501(c)3 Certification and related documents
- Flow Chart, if the business has three or more employees
- Copies of all Technical Qualifications (at least one of the following must be checked and documents submitted)
  - Certifications/Credentials
  - Specialty Licenses or Licensures
  - Training or Educational Attainment
  - Business Resume – documenting past work history, major contracts or awards
  - Public Works License
- Proof of Insurance or Bonding Coverage, carrier must be identified
- Most Recent Financial Statement
- Past three years Tax Forms
- Itemized Inventory List
- Business Profile
- Processing Fee – Cashier's check or Money order
- Original Application and three sets of copies

For TERO Use Only

Received by: \_\_\_\_\_ Date & Time Stamp: \_\_\_\_\_

Amount received: \$ \_\_\_\_\_ Method of payment:  Money Order  
 Cashier's Check

Receipt #: \_\_\_\_\_