

OMAHA TRIBE OF NEBRASKA

P.O. Box 368
Macy, NE 68039

TERO Indian Preference Contractor Application

I. Business Name _____

Owner(s) _____

Mailing Address _____

City State Zip

Physical Address _____

Email Address _____ Telephone _____

Federal Identification Number- _____ Year Business was established _____

Other name under which the firm has previously operated (provide former address and inclusive dates of operation).

Have you previously applied to this office or been awarded TERO Indian Preference Contractor status? Yes No

If yes, under what name and year certified? _____

II. What level of TERO Certification are you seeking? Level I- Partnerships, Corporations, Limited Liability Companies and Disadvantaged Business Enterprises

Level II- Non-Profits and Sole-proprietorships

III. Do you possess a Tribal Business License? Yes No If 'yes', please attach.

Does your Business License identify the same scope of work as you are seeking TERO certification? Yes No

If 'No', please see Business License Office and amend your scope of work.

Identify your firm's control category and attach requisite documentation as identified by codes:

Sole-Proprietorship - 1 Corporation -3 Disadvantaged Business Enterprise - 5

Partnership - 2 Limited Liability Company - 4 Non-Profit - 6

Codes:

1. Attach copy of Certificate of Assumed Business Name, required if seeking Level I Certification.
2. Attach copy of Partnership Agreement and Certificate of Assumed Business Name.
3. Attach copies of Certification of Incorporation, Articles of Incorporation, By laws and Amendments, Stock or Share Certificates, Board Meeting and/or Share Holder Minutes.
4. Attach copy of LLC Agreement and LLC Certificate of Registration.
5. Attach copy of DBE Certification.
6. Attach copy of 501(c) 3 Certification and related documents.

IV. Organizational Chart/Management System:

Name	Title	% of Ownership	Race

