### **U.S. MARINE MANAGEMENT (USMMI)**

140 Corporate Blvd Norfolk, VA 23502

## **BUSINESS CLASSIFICATION PROFILE**

The purpose of this form is to provide the USMMI Small Business Office basic information about your business. It does not automatically put your name on the approved vendors' list, but it will assist you in promoting your firm within USMMI.

Please answer **all questions** or enter N/A (Non-applicable).

1. Company Name	5. <b>Remittance Address</b> (If different from that shown in block 3 Address <i>MUST</i> match Invoices)			
2. <b>Subsidiary</b> of  or <b>Affiliate</b> , or N/A	<del>-</del> 			
Name:				
3. Mailing Address (For Correspondence)				
	_ 6. Company Web Page			
	- 7. Primary POC E-mail address (*REQUIRED*)			
4. Facility Address (No P.O. Box please)	<u> </u>			
	- 8. Telephone			
	_ 9. Fax			
	10. NAICS Code			
11. Tax Payer Identification				
11.a Tax Payer Identification Number	<u> </u>			
U.S. COMPANIES ONLY – Complete and return Internal F	Revenue Service Form W-9, Request for Taxpayer Identification			
Number and Certification.				
12. Standard Business Classification Per FAR 52.219-1	- See SBA size standards and classifications at <a href="http://www.sba.gov">http://www.sba.gov</a>			
(Does not apply to foreign suppliers) Skip to Nu	mber 12			
☐ Small Business ☐ Large Business				
12a. Small Business Classification (If you are a small business, but not SDB, Vet, SDV, WO or HUBZone, check "None of the above")				
☐ Small Disadvantaged ☐ Women-owned ☐ HubZone (Provide copy of your certification with form)				
☐ Veteran-owned ☐ Service Disabled Veteran ☐ None of the above				
12b. If Small Disadvantaged Business (SDB) (Check App	propriate Blocks)			
8A Certified (Provide a copy of your 8A certification from SBA with this form)				
Historically Black University-College/Minority Institution				
☐ Native American ☐ Black American ☐ Hispanic American				
Asian-Pacific American Subcontinent (Asian-Indian) American				
Alaskan Native Corp (ANC) or Indian Tribe				

13. Quality System					
13a. Does your company have a quality system? 🗌 Yes 🔲 No 🛮 If yes, please provide a copy of your certificate.					
13b. Is the quality system compliant with a re	ecognized standard?	Yes No			
13c. Name of quality system:					
13d. Scope of coverage:					
13e. Is the quality system certified to a recognized standard?   Yes (complete below information)   No					
Name of Registrar and approval/certificate date: Registrar Approval Date					
14. Business Type:					
☐ Manufacturing	Distributor	Services	Other		
Select products and/or services below:  SERVICES  Boiler Services  Bridge Electronics  Chemicals & Gasses  Classification Society (ABS)  Compressors, Pump, & Motors, and Fans  Crane, Hydraulic, & Ramp Services  Elevator Services  Electrical Services  Forklift & Handling Equipment Services  Gage Calibration Services  Heating, Ventilation, & Air Conditioning  Locksmith  Naval Architect/Consultant  Office Equipment & Services  Pipes, Valves & Fittings  Propulsion Services  Safety Services  Safety Services  Shipyards  Underwater Services  PARTS  Air Conditioning & Reefer Parts  Boiler Parts	Cha   Che   Com   Crar   Elec   Fitne   Galle   Gan   Hose   Hose   Med   Navi   Offic   Pain   Prop   Prop   Prop   Prop   Sepa   Sew   Tran   Wire	ess Equipment ey & Laundry Equipmer gways & Ladders es, Gaskets, Couplings, elecom, Electronics, Au e Oil/Bunkers suring Equipment ical Articles igation & Communication ee Supplies t es, Valves, Fittings & An oulsion/Engine/Engine F risions/Food Materials (e.g., Rubber ety Equipment/PPE arators, Heat Exchange age, Sanitation esportation – Sea, Air, R es/Ropes/Container Har	& Bearings dio/Visual  on  odes Parts  r, Minerals, Plastic)  rs & Distilling Units  oad, Mail Services odling Equipment/Lashing		
16. <b>References</b> – List three references for which you provided supplies or services during the preceding 12 months.					
1. Company/Agency	POC	Phone	E-Mail		
2. Company/Agency	POC	Phone	E-Mail		
3. Company/Agency	POC	Phone	E-Mail		

17a. Authorization Agreement for Electronic Payments	
	<b>USD vendors</b> . Prior to initial payment, you will be contacted by ormation to view remittance data. Complete all of section 17 for for foreign currencies and USMMI payment terms are NET30.
17b New Application Change Information	Cancel ACH Payments
account. If funds to which I (we) am (are) not entitled are deposited in	pository Financial Institution named below, and to credit the same to such n my (our) account, I (we) authorize the Company to direct the depository by by that the authority will remain in effect until I have (or either of us)
Financial Institution Information (ACH or Wire Transfers):	
17c. ACH Account Wire Account (Foreign Vend	lors ONLY)
17d. Financial Institution:	
17e. Financial Institution Address:	<u> </u>
17f. City:	State: Zip Code:
17g. Bank Country:	Currency:
17h. Bank Contact:	Contact Telephone Number:
17i. Nine Digit Bank ABA Number/ Routing Number:	
17j. Swift Number:	
17k. Depositor Account Name:	
17I. Depositor Account Number:	
This authorization is to remain in full force and effect until Company has in such time, and in such manner as to afford Company and Financial	as received written notification from me (or either of us) of its termination Institution a reasonable opportunity to act on it.
Under 15 U.S.C. 645(d), any person who misrepresents its size status s administrative remedies; and (3) be ineligible for participation in program	
Print Name & Title of Authorized Official Signature	Date

# STANDARD BUSINESS CLASSIFICATION DEFINITIONS (PER FAR 52.219-1, 19.001)

#### **SMALL BUSINESS CONCERN:**

A concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts and as further defined in FAR 19.102. *Manufacturing and distributing firms*: total employees do not exceed 500, 750, or 1000 as defined in FAR 19.102 and 13 CFR 121. *Services*: based on averaged annual volume of sales for the past three years per FAR 19.102.

(**NOTE:** If firm total employment is between 500 and 1,000 contact Small Business Administration for assistance for determining proper SIC code size standard.) Information on classifications and size standards may also be viewed on the SBA web site, see <a href="http://www.sba.gov">http://www.sba.gov</a>

#### SMALL DISADVANTAGED BUSINESS CONCERN:

As defined in FAR 19.102 and 13 CFR 124.1002 is a firm which meets the above criteria as a Small Business, and which is at least fifty-one percent unconditionally owned (as set forth in 13 CFR 124.105) by one or more socially or economically disadvantaged individuals; and whose management and daily business operations are controlled by one or more of such individuals.

Socially and economically disadvantaged individuals include:

- Black Americans, Hispanic American, Native American (American Indians, Eskimos, Aleuts, or Native Hawaiians), Asian-Pacific American (persons with origins from Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, Japan, China, Taiwan, Laos, Cambodia (Kampuchea), Vietnam, Korea, The Philippines, U.S. Trust Territory of the Pacific Islands (Republic of Palau), Republic of the Marshall Islands, Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, Guam, Samoa, Macao, Hong Kong, Fiji, Tonga, Kiribati, Tuvalu, or Nauru), Subcontinent Asian (Asian-Indian) American (persons with origins from India, Pakistan, Bangladesh, Sri Lanka, Bhutan, The Maldives Islands, or Nepal). Individual/concerns, other than one of the preceding. See 13 CFR 124.109, 124.110 and 124.111 for ANCs, MHOs, or CDCs.
- Historically Black Colleges-Universities and Minority Institutions (HBCU/MIs) are classified as Small Disadvantaged concerns.

#### **WOMEN-OWNED SMALL BUSINESS CONCERN:**

A firm which meets the above criteria as a Small Business and which is at least 51 percent owned by one or more women or, in the case of any publicly owned business, at least 51 percent of the stock of which is owned by one or more women; and whose management and daily business operations are controlled by one or more women.

#### **HUBZONE SMALL BUSINESS CONCERN:**

A small business concern that appears on the List of Qualified HUBZone Small Business Concerns maintained by the SBA.

#### SMALL BUSINESS CONCERN OWNED AND CONTROLLED BY VETERANS:

The term "small business concern owned and controlled by veterans" means a small business concern:

- not less than 51 percent of which is owned by one or more veterans or, in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more veterans; and
- the management and daily business operations of which are controlled by or more veterans
  - VETERAN -- The term "veteran" has the meaning defined in 38 U.S.C. 101 (2).

#### SMALL BUSINESS CONCERN OWNED AND CONTROLLED BY SERVICE-DISABLED VETERANS:

The term "small business concern owned and controlled by service-disabled-veterans" means a small business concern:

- not less than 51 percent of which is owned by one or more service-disabled veterans or, in the case any publicly owned business, not less than 51 percent of the stock of which is owned by one or more service-disabled veterans; and
- the management and daily business operations of which are controlled by one or more service-disabled veterans or, in the case of a veteran with permanent and severe disability, the spouse or permanent caregiver of such a veteran.
  - SERVICE-DISABLED VETERAN The term "service-disabled veteran" means a veteran with a disability that is service connected (as defined in <u>section 101 (2) of title 38, United States Code</u>).