AFFIDAVIT OF SMALL BUSINESS GRADUATION

INSTRUCTIONS FOR AFFIDAVIT OF SMALL BUSINESS GRADUATION:
The following form is for the purpose of recognizing those firms that have graduated from METRO's Small Business program. Graduation occurs when a firm has grown beyond the small business requirements. If you are currently a small business working on a METRO contract and exceed the requirements during your contract, you will still be treated as a small business until the conclusion of your contract. If in the future your small business again meets the small business criteria you are welcome and encouraged to re-apply for small business certification. This affidavit does not preclude a small business from re-applying for SBE certification if they became eligible in the future. Please feel free to contact the Office of Economic Business Opportunity at 713-739-4844 if you have any questions.

(Must be completed by each owner. Make additional copies as necessary)

I certify that I am the owner of_____.
I am informing METRO that I no longer qualify, as a METRO Certified Small Business Enterprise.

According to METRO's eligibility requirements, stated in the Small Business Program:
      "For this program, "small business" means a business whose gross revenues or number of employees averaged over the past three years, inclusive of any Affiliates as defined by 13 CFR Part 121.103, does not exceed the size standards as defined pursuant to Section 3 of the Small Business Act and for which the net worth of each owner does not exceed $2.047 million."

According to this regulation, my company has exceeded the:

_____ Size Standards

_____Personal Net Worth (exceeds $2.047 Million)

Print Name: _____   Signature: _____

Executed on _____ (Date)

The State of_____

County of _____

Before me, a Notary Public, on this day personally appeared_____, known to me (or proved to me on the oath of) to be the person whose name is subscribed to the forgoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____ A.D. 20____

_____
Notary Public, State of _____

_____
(Print name of Notary Public here)

(Personalized Seal)
My commission expires the _____ day of _____ 20____