**STATE OF KANSAS**

**“DISABLED VETERAN OWNED BUSINESS” APPLICATION**

***Submit completed checklist and application to:***

**KANSAS PROCUREMENT AND CONTRACTS**

**900 SW JACKSON, ROOM 451-S**

**TOPEKA KS 66612-1216**

*By submission of a signed application, the vendor certifies that all enclosed information is true and accurate and that any exceptions are clearly identified.*

*A “Disabled Veteran Owned Business” is a business certified annually by the Department of Administration that is a sole Proprietorship, partnership, association or corporation domiciled in Kansas, or any corporation, even if wholly owned subsidiary of a foreign corporation, and is verified by the Commission on Veteran’s Affairs that not less than 51% is owned by one or more disabled veterans or, in the case of a publicly owned business, not less than 51% of the stock owned by one or more disabled veterans, the management and daily business operations are controlled by one or more disabled veterans and such business maintains these requirements during the entire contract term.*

Legal Name of Person, Firm or Corporation

Contact Person:

Street Mailing Address City & State Zip

County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PO Box (if applicable) City & State Zip

Toll Free Telephone Local Phone

Cell: Fax Number

E-Mail

Signature Date

Typed Name Title

*DISABLED VETERAN OWNED BUSINESS APPLICATION QUESTIONNAIRE*

*The definition of what constitutes a “DISABLED VETERAN OWNED BUSINESS” is established by Kansas Law. KSA 75-3740*

*By statute, any business that becomes certified as a Disabled Veteran Owned Business must be reviewed by the Kansas Commission on Veteran’s Affairs and re-certified on an* ***annual basis*** *by the Department of Administration.*

Legal Name of Person, Firm or Corporation

*When submitting your application, please initial the following items to indicate that you understand the requirement and have included the necessary information with your submission.*

*Initial below*

*When line*

*Completed*

***\_\_\_\_\_ Complete and submit the entire DISABLED VETERAN OWNED BUSINESS APPLICATION QUESTIONNAIRE and attachments as described herein***

***\_\_\_\_\_ CHECK ONE (1) BUSINESS-TYPE THAT BEST DESCRIBES YOUR BUSINESS ENTITY:***

*\_\_\_\_\_ Sole Proprietorship, or*

*\_\_\_\_\_ Partnership, or*

*\_\_\_\_\_ Association, or*

*\_\_\_\_\_ Corporation domiciled in Kansas, or*

*\_\_\_\_\_ Wholly-owned subsidiary of a foreign corporation*

***\_\_\_\_\_\_ Provide a separate letter or statement briefly describing your business’ Kansas Work Presence, using the following basic criteria as a guide as you prepare the written narrative***

* *Does your business make its principal place of business in Kansas?*
* *Does your business pay a majority of its payroll (in dollar volume) to residents of Kansas?*
* *Does your business employ Kansas residents as a majority of its employees?*
* *Has your business made significant capital investments in Kansas?*

***\_\_\_\_\_\_ CHECK THE STATUS THAT BEST DESCRIBES YOUR BUSINESS ENTITY:***

*In order to achieve “Disabled Veteran Owned Business” status a disabled veteran must have served in the armed forces of the United States and is entitled to compensation for service connected disability, according to the laws administered by the Veteran’s Administration.*

*\_\_\_\_\_ Yes, meet one of these requirements.*

*\_\_\_\_\_ No, do not meet either of these requirements.*

Please provide copies of any documents from the Veteran’s Administration, which can be used to support your application.

*DISABLED VETERAN OWNED BUSINESS APPLICATION QUESTIONNAIRE*

Legal Name of Person, Firm or Corporation

*Initial below*

*When line*

*Completed*

***\_\_\_\_\_ CHECK THE STATUS THAT BEST DESCRIBES YOUR BUSINESS ENTITY:***

*In order to achieve “Disabled Veteran Owned Business” status,* ***the statute requires that Kansas Commission on Veterans Affairs is able to verify status through the Veteran’s Administration.***

*\_\_\_\_\_ Yes, in compliance*

*\_\_\_\_\_ No, not in compliance*

The State will be utilizing the service-disabled veteran-owned small businesses (SDVOSBs) web site to verify the status of the business.  Businesses applying for certification should be registered.