

TO: TERO-CERTIFIED VENDOR

FROM: TERO STAFF

RE: INDUSTRY AREA ADDITION CERTIFICATION

Thank you for applying to add an area of certification. The complete application must be turned in **ten (10) calendar days prior** to the monthly Commission meeting (normally held on every third Wednesday of the month). Please pay a \$100.00 for each trade area you want to add (a fees form is attached).

TURN IN COMPLETE APPLICATION (10) TEN CALENDAR DAYS PRIOR TO MEETING)

If and when your business is approved, you will be required to pay an additional \$100.00 certification fee. You are not considered certified in an additional area until your area has been approved by the TERO Commission.

An economic entity shall also have been operational for at least one year in any areas of trade they <u>add</u> later and shall provide additional business plans for the additional areas they seek to be certified in.

Please note: TERO Vendors are required to re-certify their status annually by March of each year. Vendors shall pay \$175 for each area of re-certification. New Vendors certified by the Commission before September shall pay the re-certification fee for the upcoming year.

If you have any questions regarding the application or the program, please contact a Compliance Officer.

Jake Crowe, Compliance
Manager
(d) 828.359.6544
(m) 828.736.6703
jacocrow@ebci-nsn.gov
Thank you.

John Taylor, Compliance Officer (d) 828.359.6477 (m) 828.736.4453 johntayl@ebci-nsn.gov

Please initial to confirm that you have read this page _____



TERO Vendor Industry Area Addition Application

Name		Title	
Name of Business			
Mailing Address			
Physical Address			
Business Phone	Mobile Phone		Fax
EMAIL Address			
Tribal Affiliation (please provide copy of Enrollment Card)			Enrollment Number
Search (census.gov) or ww Each area of certification is	quested (please refer to the I w.naics.com. A TERO Compli s treated independently and	ance Officer will be happy requires a separate applica	
3)			
Please turn in the followin Addition of new serv	g required documentation: ices on insurance policy	☐ Applicable licenses	s 🔲 Business Plan
☐ 3 Reference Letters	☐ \$100.00 application fe	ee receipt	

Name License Holder	Iners and employees. Issuing Authority & Name of License/Certification
	issuing Authority & Name of License/Certification
1)	
2)	
3)	-
List three major projects performed within past twe	
Name Contact	·
1)	
2)	
3)	
List major business equipment/assets possessed:	
Quantity Description	Owned or Leased?
1)	
2)	
2)	
3)	
FOR OFF	ICE USE ONLY
15.151	
Name of Business	
Information verified by	Date:
Information vermed by	Date
Industry Area Addition Certification \square APPROVED /	☐ DENIED on Date:
Notes	
Notes:	