

COMPANY/ORGANIZATION INFORMATION

Date:

To accurately identify your organization for PNNL's records and to facilitate the processing of discussions, meetings, potential license or other agreement, please provide the following information and sign below:

Business Legal Name:

Also Known As:

Address:

Website:

Dun & Bradstreet Number (DUNS) Number:

Contracts/Business Point of Contact (Name, Phone Number, email):

Technical Point of Contact (Name, Phone Number, email):

Invoice Point of Contact (Name, Phone Number, email):

U.S. SMALL BUSINESS PROGRAM REPRESENTATIONS.

Representations. The Sponsor represents and certifies that it:

- ☐ **IS** a U. S. small business concern, **OR**
☐ **IS NOT** a U. S. small business concern

Definitions. "Small business concern," as used in this provision, means 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 subcontracts, and qualified as a small business under the criteria in 13 CFR 121. Any person who misrepresents a firm's status as a small business concern in order to obtain favorable consideration for cost reduction is subject to the penalties set forth in the False Claims Act (18 USC 1001).

COMPANY/ORGANIZATION INFORMATION

The company represents (check all that apply):

- ☐ Corporation incorporated under the laws of the United States, State of _____ ,
- ☐ Nonprofit organization
- ☐ Other (please specify): _____
- ☐ Business enterprise or legal entity organized, chartered or incorporated under the laws of any country other than the United States or its territories. _____ (name of country)
- ☐ Organization's parent company is a foreign organization. _____ (name of country)
- ☐ Organization is owned or controlled by a foreign government, agency, firm, corporation or individual. _____ (name of country)
- ☐ Non-U.S. citizens serve as members of organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management officials. _____ (name of country(s))

I hereby verify that the above business classification representation is current, accurate and complete.

Signature :

Date:

Print Name:

Title:

Email Address:

Please email this form to PNNL's IP Compliance Office: complianceoffice@pnnl.gov

Note: During the course of the agreement, if the above information changes, please update.