



NOTICE OF MATERIAL CHANGE - INDIANA VETERAN OWNED SMALL BUSINESS ENTERPRISE

State Form 56254 (2-17)

**DEPARTMENT OF ADMINISTRATION
PROCUREMENT DIVISION**
402 W. Washington St. Rm. W468
Indianapolis, IN 46204

Is your firm currently verified as a Veteran Business Enterprise (VBE) by the Veteran's Administration (CVE)? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is your principal place of business in the State of Indiana? <input type="checkbox"/> Yes <input type="checkbox"/> No
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SECTION A BASIC INFORMATION

If additional space is required, submit an attached sheet.

Name of certified firm		Bidder registration number (required)	
Address (number and street)		City, state, and ZIP code	County (Indiana only)
Name of contact person		Title of contact person	
Business telephone number ()	Business fax number ()	Business e-mail address	Business website address
Name of owner		Number of years owned	Percentage owned %

SECTION B MATERIAL CHANGE INFORMATION

Type of material change

Change in ownership (percentage owned or owner) Change in corporate structure (i.e. partnership, corporation, etc.)

Change in principal place of business Other (Please explain.): _____

Date of material change (month, day, year)

Material change narrative – Briefly describe the nature of the material change.

CERTIFICATE OF AFFIRMATION

This must be signed by the President, Chief Executive Officer, or the highest qualifying member / owner of the firm.

The undersigned swears or affirms, under the penalty of perjury, that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of _____ as well as the ownership thereof.

Any misrepresentations will be grounds for terminating any contract which may be awarded, to initiate action under federal, state, or local laws concerning false statements, or the denial of certification.

Signature of owner, officer, or partner		Date (month, day, year)
Printed name	Title	