## **Business Support Certification**

Business: _		
Address: _		
-		
Annual Sales Re	evenue:	\$
Type of Busines	s:	
Start-Up: Yes/I	No If yes w	ill business be located in Ashtabula CountyYes/No
Minority Owne	d Business:	Yes/No

## **Certification**

I certify that my business is located in Ashtabula County, OH.

If marked "Yes" above I certify I am the Business Owner and qualify as a Minority Owned business.

If marked "Yes" above as a Start-Up I certify my business will employ less than 50 employees and less than \$1 million in revenue in the initial year of operation.

Signature of Business Owner (s)

Date

Name and Title