

DOCUMENT CHECKLIST FOR ANNUAL REVIEW

THIS PAGE MUST BE INCLUDED WITH THE REVIEW PACKET (NO STAPLES)

COMPANY NAME	
REQUIRED DOCUMENTS	

<input type="checkbox"/> No Change Affidavit	<i>This document must be notarized.</i>
<input type="checkbox"/> Federal Business Tax Return [signed and dated]	<i>Provide information for the most recent year; including all schedules and forms.</i>
<input type="checkbox"/> Maryland Department of Assessments and Taxation – Proof of Good Standing	<i>Proof of Good Standing from the Maryland Department of Assessments and Taxation (www.dat.state.md.us) is required for Maryland domiciled firms and MBE certified firms (except sole proprietorships and general partnerships)</i>

Comments:

THE FOLLOWING DOCUMENTS ARE REQUIRED ONLY IF OWNERSHIP OR BUSINESS STRUCTURE HAS CHANGED.

OWNERSHIP [Including Proof of Payment]	
<input type="checkbox"/> Section 3 - Uniform Certification Application	<i>Complete page 7 for 51% owner(s) and page 8 for ownership less than 51 %. Provide a separate sheet for each new owner.</i>
<input type="checkbox"/> USDOT Personal Net Worth Statement	<i>Please provide a separate sheet for each new owner.</i>
<input type="checkbox"/> Updated Stock Ledger and Stock Certificates	<i>Required if the business is a corporation.</i>
<input type="checkbox"/> Resume(s)	<i>Required for new owner(s).</i>
<input type="checkbox"/> Proof of Citizenship	<i>If claiming minority status.</i>
<input type="checkbox"/> Updated By-Laws or Operating Agreement	
<input type="checkbox"/> Current Meeting Minutes	
<input type="checkbox"/> Shareholder Buyout Agreements	

BUSINESS STRUCTURE	
<input type="checkbox"/> Articles of Incorporation or Organization	
<input type="checkbox"/> By-Laws or Operating Agreement	
<input type="checkbox"/> Meeting Minutes	
<input type="checkbox"/> Maryland Department of Assessments and Taxation Amendments	<i>Documents of a change in business structure from the Maryland Department of Assessments and Taxation (www.dat.state.md.us) is required for Maryland domiciled firms (except sole proprietorships and general partnerships and MBE certified firms.</i>

FOR IN-HOUSE USE ONLY. Please do not write below this line.

PROCESSING HISTORY			
Date Prepped:		By Whom:	
Date Scanned:		By Whom:	
Date Reviewed:		By Whom:	