



**DTE Energy®**

# **Supplier Prequalification Lite Questionnaire**

(Suppliers <\$300k/year)

**Note: It is imperative that this questionnaire be completed in its entirety to be considered for review.**

**Prequalification Questionnaire** (Suppliers <\$300K/year)



<b>1.</b>	Legal Company Name		Telephone No. (    )	
	Street Address	City	State	
	Zip	Duns No.	Federal Tax ID No.	

**Invoice Mailing Address (if different from above)**

<b>2.</b>	Company Name			
	Street Address	City	State	Zip

**Contacts**

<b>3.</b>	Sales Representative	Email Address	Telephone No.
	Accounts Receivable Contact	Email Address	Telephone No.

**Organization**

<b>4.</b>	Business Type (Check One)		
	<input type="radio"/> Corporation	<input type="radio"/> Sole Proprietor	<input type="radio"/> Other (specify) _____

**Type of Organization**

<b>5.</b>	<input type="radio"/> Large Business	<input type="radio"/> Small Business	<input type="radio"/> Small Disadvantaged Business
	<input type="radio"/> Women Owned Business	<input type="radio"/> Minority Owned Business	<input type="radio"/> Veteran Owned Business
	<input type="radio"/> Service-Disabled Veteran Owned	<input type="radio"/> HUBZone Business	<input type="radio"/> Other _____

Certification: Supplier must forward a copy of its U.S. Small Business Administration ("SBA") SDB and/or HUBZone Certification along with this questionnaire; if you have not received certification from the SBA, please consult the SBA's website for the certification process and forward a copy upon completion. In addition, if business is certified by a local or regional certifying agency please identify.

Agency Name: \_\_\_\_\_

**Foreign Corrupt Practices Act (FCPA)**

(If a yes is entered to any question in this section, there may be additional requirements.)

<b>6.</b>	A. Are you a foreign entity, individual residing outside of the US, foreign government or foreign state-owned or affiliated company?	<input type="radio"/>	Yes
		<input type="radio"/>	No
	B. Is your Company acting as an agent (including any sales or purchasing agent), partner, co- or joint-venturer, or consultant of DTE in a foreign country?	<input type="radio"/>	Yes
		<input type="radio"/>	No
	C. Will this relationship have a foreign element (such as a supplier that has foreign ownership or foreign subcontractors or subvendors) that is not otherwise covered by questions A and B above?	<input type="radio"/>	Yes
		<input type="radio"/>	No
	D. If yes to C, Please specify if you are selling to DTE out of your inventory or if the goods are being made to order.	<input type="radio"/>	Inventory
		<input type="radio"/>	Made to Order
	E. Are you providing customs brokering, freight-forwarding, logistical support, or import/export services or are you contracting with others for such services on DTE's behalf?	<input type="radio"/>	Yes
		<input type="radio"/>	No

More questions on back of questionnaire.



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<b>Requirements</b>	
<b>7.</b>	<p>Attach a complete W8 or W9 signed by an authorized agent for your company.</p> <hr/> <p>If your company prefers direct deposit (ACH or wire), you need to fill out the attached EFT form. In addition, a second document is required for all banking info, such as a letter on company letterhead that shows bank name, account number, routing number, etc.</p>

On behalf of the company identified herein, I certify that the statements and all answers to questions on this form are true and correct.

Name/Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Officer responsible for assuring the accuracy of this document)

Fill out the questionnaire completely, scan it, and email it back to the DTE representative that sent it to you. Attach the required documents specified above.

## **BUSINESS “TYPE” DEFINITIONS**

### **1. LARGE BUSINESS**

A business that exceeds the small business size code standards established by the U.S. Small Business Administration as set forth in code of Federal Regulation, Title 13, Part 121.

### **2. SMALL BUSINESS**

A business, qualified as a small business under the criteria in 13 CFR Part 121.

### **3. SMALL DISADVANTAGED BUSINESS**

A small business that is at least fifty-one percent (51%) owned by one or more individuals who are both socially and economically disadvantaged and control the management and daily business operations. African American, Hispanic American, Asian Pacific American, Subcontinent Asian American and Native American (American Indian, Eskimo, and Aleut) are presumed to qualify and others may qualify if they can show they are disadvantaged as provided in FAR 52.219-8, 13 CFR Part 124.

### **4. WOMAN-OWNED BUSINESS**

A business owned, controlled and managed by one or more women as defined in FAR 52.219-8, 48 CFR 2. 101.

### **5. MINORITY OWNED BUSINESS**

A business that is at least fifty-one percent (51%) or more minority-owned, operated and controlled by a United States citizen.

### **6. VETERAN-OWNED SMALL BUSINESS**

A small business that is at least fifty-one percent (51%) owned by one or more veterans (as defined at 38 U.S.C. 101(2)) who control its management and daily business operations as defined in FAR 52.219-8, 48 CFR 2. 101.

### **7. SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS**

A small business that is owned, controlled and managed by one or more service-disabled veterans (as defined in 38 U.S.C. 101(2)), with a disability that is service-connected, (as defined at 38 U.S.C. 101(16)) (or, in the case of a service-disabled veteran with permanent and severe disability, the spouse or permanent caregiver of such veteran) as defined in FAR 52.219-8, 48 CFR 2. 101.

### **8. HISTORICALLY UNDERUTILIZED BUSINESS ZONE SMALL BUSINESS**

A small business that appears on the list of Qualified HUBZone Small Business Concerns maintained by the Small Business Administration pursuant to 13 CFR Part 126.

## **Other**

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