

## Instructions for Online Target Market Enrollment Form

Thank you for your interest in being a part of the City of Minneapolis Target Market Program. To enroll, complete the online form available at: <http://www.minneapolismn.gov/finance/procurement/TargetMarketProgram>

If you have questions regarding the enrollment process or your eligibility, visit the Target Market website, send us an email at [TargetMarket@minneapolismn.gov](mailto:TargetMarket@minneapolismn.gov) or call the Procurement office at 612-673-2500.

Affirmation – Please affirm that the information being entered is true and correct to the best of your knowledge.

### Part I – Eligibility

Question 1 – Please choose the Minnesota County where your principal place of business is located

Question 2 – Answer yes if your business is independently owned and operated

Question 3 – Answer yes if your business is a for-profit business

Question 4 – Answer yes if your business performs a commercially useful function.

- A commercially useful function is defined as a function performed by a business that is responsible for the execution of a distinct element of the work of a contract and carrying out its responsibilities by actually performing, managing, and supervising the work involved. Acting as a conduit to transfer funds to another business does not constitute a commercially useful function unless it is done as a normal business practice of a particular industry.

Question 5 – **Enter the average annual gross receipts for your business' most recently completed three fiscal years, as your business defines fiscal year. For businesses in operation fewer than three years, provide the average annual gross receipts for the fiscal years you have been in business.** (Calculate the average by adding your gross receipts for each year together, and then dividing that sum by the number of years you included.

- For New Businesses, please enter your projected or estimated gross receipts

Question 6 – Enter up to three 6-digit NAICS Code(s) for your industry. Click on the link within the form to go to the NAICS website and look up your code(s).

- Please describe in a few words, what kind of work your business performs

### Part II – Contact Information

Question 7 – Enter the legal name of your business

Question 8 – Enter your DBA (doing business as) name, if applicable

Question 9 – Enter the street address, city and zip code of your principal place of business

Questions 10, 11, 12 – Enter the first and last name of the primary owner of your business as well as the primary owner's phone number, fax number and e-mail address

Questions 13, 14, 15 – Enter your preferred business' contact information (name, phone and e-mail address) if different from primary owner

Part III – Business Type and Certification (these questions will not impact your eligibility for the Target Market Program and are being asked for informational purposes only)

Question 16 – Check the boxes that describe your business (check all that apply)

Question 17 – Check the boxes that show which certifications your business has (check all that apply). If you do not hold any listed certifications, please select the None/Self-Certified box

Question 18 – Select yes or no to whether you have had a contract with the City of Minneapolis in the past.

Submit the form electronically.