**STATE OF MINNESOTA**

**MINNESOTA STATE PREFERENCE FORM**

In accordance with M.S. 16C.16, eligible certified targeted group (TG) Vendors will receive a six percent (6%) preference as a basis of award. Preference will only be allowed if the Vendor is certified prior to the response date. The targeted group (TG) preference is applied only to the first $2,000,000 of the bid/proposal. Preferences are not cumulative; the total percentage of preference granted on a contract may not exceed the highest percentage of preference allowed for that contract. To be eligible for the targeted group (TG) preference, Vendors must be certified by one of Minnesota State’s recognized certifying agencies:

a. [State of Minnesota – Department of Administration](http://www.mmd.admin.state.mn.us/tgeligibility.htm)

1. [Central CERT Certification Program](https://www.stpaul.gov/departments/human-rights-equal-economic-opportunity/contract-compliance-business-development-9) (CERT)
2. [North Central Minority Supplier Development Council](http://www.northcentralmsdc.net/) (NCMSDC)

d. [Women’s Business Development Center](https://www.wbdc.org/mn/) (WBENC)

The Vendor shall designate their company’s status below.

 ARE YOU A CERTIFIED, TARGETED GROUP VENDOR? \_\_\_Yes \_\_\_No

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Statutory requirements and appropriate documentation must be met **by the solicitation response due date and time** to be awarded the targeted group preference.

**Claim the Preference**

**By signing below I confirm that:**

My company is claiming targeted group preference afforded by Minn. Stat. § 16C.16. By making this claim, I verify that:

* The business has been certified by one of Minnesota State’s recognized certifying agencies as being a targeted group (TG) business.

[NAME OF COMPANY] [INSERT DATE mm/dd/yyyy]

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [TELEPHONE NUMBER]

[PRINTED NAME] [INSERT TITLE]

**Attach a copy of your firm’s certification letter and sign and return this form with your solicitation response to claim the TG preference.**