



SF CITY PARTNERS

City and County of San Francisco

A Step by Step Guide to Becoming a Fully Compliant Supplier

Version 2.6



Topic	
Purpose of this Article	To provide step-by-step directions to help Registered Bidders become Fully Compliant Suppliers
Audience	Registered Bidders that want to become Fully Compliant Suppliers
Author	Michael West and Jared Espina
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Related Content	"Complete Your Business Tax Registration", "File an Equal Benefits Ordinance Declaration", "File an Optional 14B Local Business Enterprise Certification", 12B
Outline	See outline in the job aid



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PURPOSE AND DESCRIPTION

Purpose

This document provides steps and information to help business entities that have already become Registered Bidders and that want to become Fully Compliant Suppliers to the City & County of San Francisco. If your business already has a Supplier account, you should not be creating a new Supplier account. If you are unsure if your business already has a Supplier account, then you should contact User Support at 415.944.2442 for assistance.

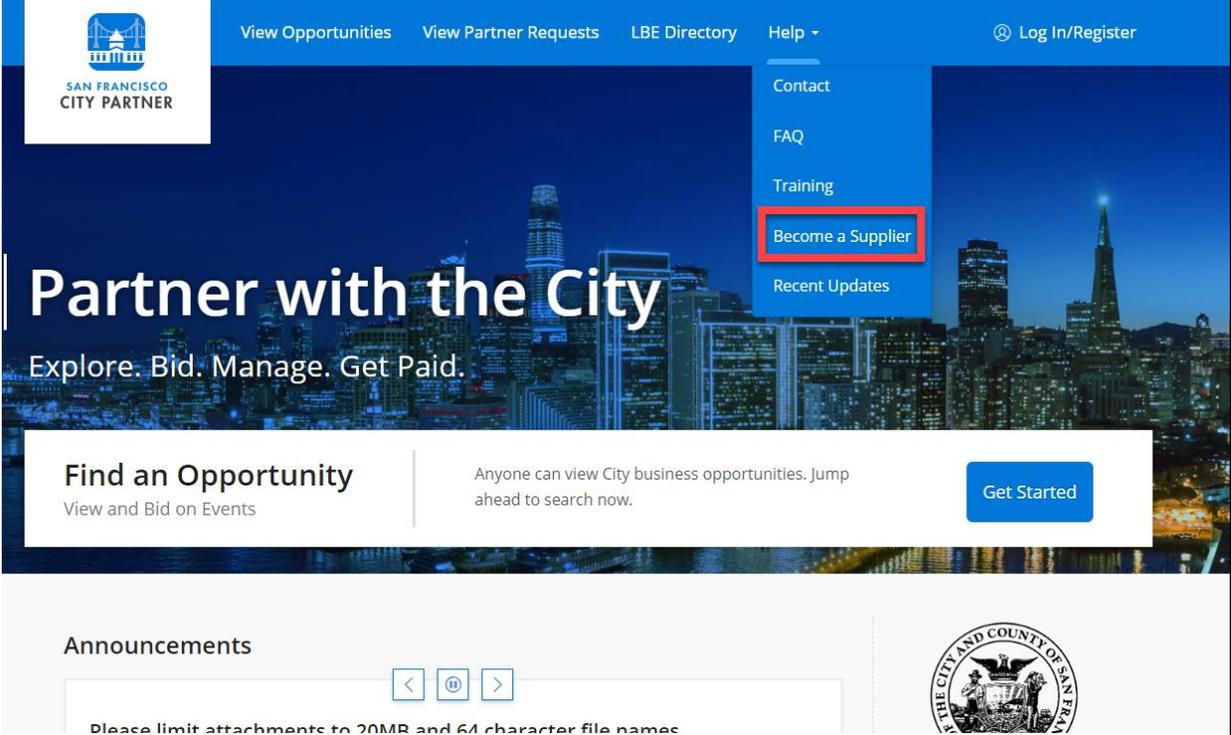
Key Background Information

Becoming a Supplier to the City & County of San Francisco is a two-tier process.

- **Registered Bidder:** The first step to begin working with the City is a short registration process in order to become a Registered Bidder. Being a Registered Bidder will allow your business to view and bid on contracts (however your business cannot be fully awarded a City contract until it goes through the steps required to become a Fully Compliant Supplier).
- **Fully Compliant Supplier:** Although Registered Bidders can view and bid on City business, in order to be fully awarded a City contract, a Registered Bidder will have to go through the Business Tax Registration and Equal Benefits Declaration processes required to become a Fully Compliant Supplier. The time to complete these can vary, and we strongly recommend that you start these processes as soon as possible to expedite your contract wins. ****Equal Benefits Ordinance, formerly known as Chapter 12B***



TOPIC 1: HOW TO BECOME A FULLY COMPLIANT SUPPLIER

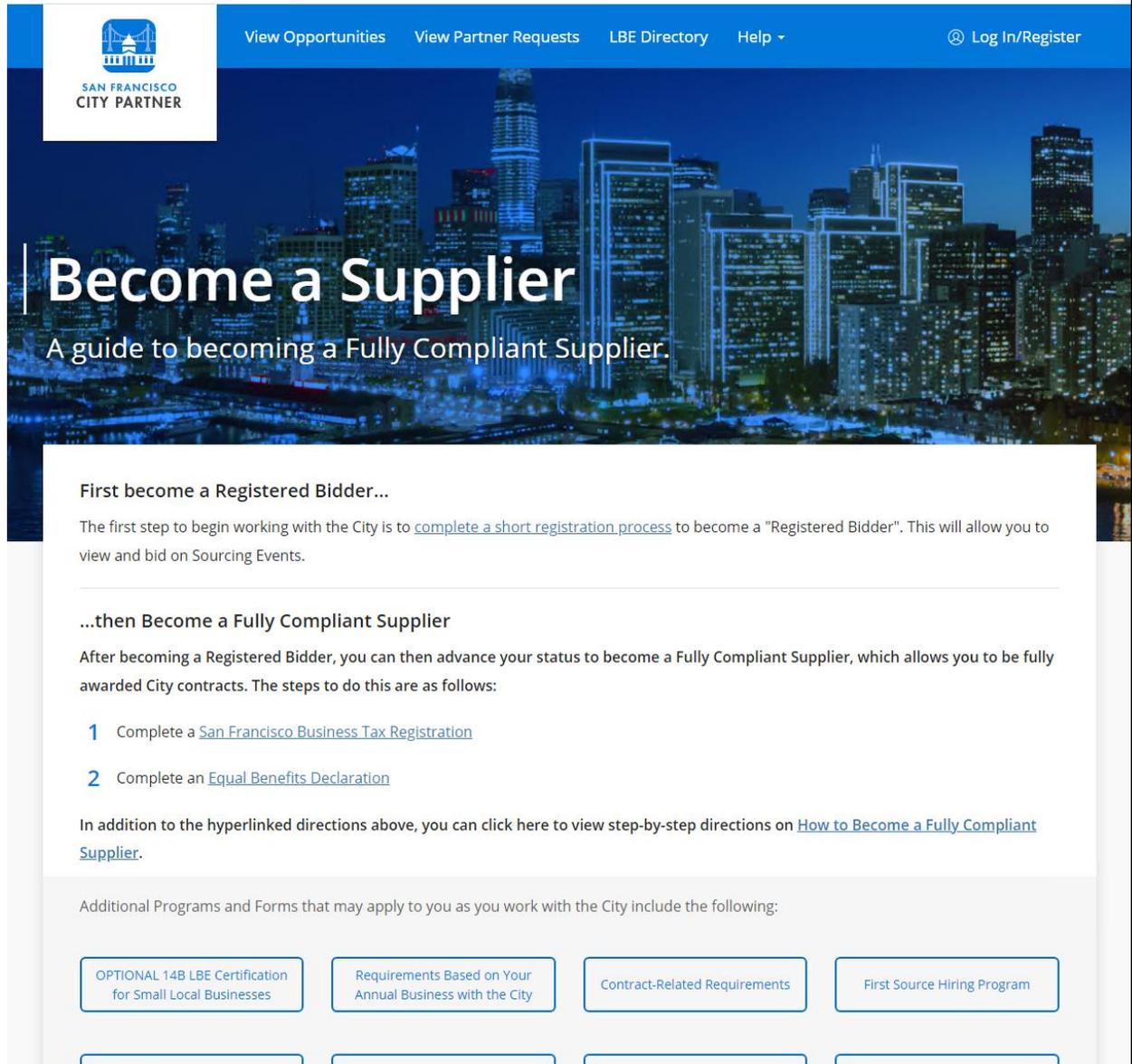
Step	Action
1.	<p>If you are already a Registered Bidder, then you can follow the steps to become a Fully Compliant Supplier. Go to the SF City Partner website at https://sfcitypartner.sfgov.org. Click on the “Help” pulldown menu and click on “Become a Supplier”.</p>  <p>The screenshot shows the SF City Partner website interface. At the top, there is a navigation bar with links for 'View Opportunities', 'View Partner Requests', 'LBE Directory', 'Help', and 'Log In/Register'. The 'Help' menu is open, showing options for 'Contact', 'FAQ', 'Training', 'Become a Supplier' (highlighted with a red box), and 'Recent Updates'. The main content area features a city skyline background with the text 'Partner with the City' and 'Explore. Bid. Manage. Get Paid.'. Below this, there is a 'Find an Opportunity' section with a 'Get Started' button. At the bottom, there is an 'Announcements' section with a circular icon and a note about attachment limits.</p>



2.

On the Become a Supplier page, you will see that there are two main parts to becoming a Fully Compliant Supplier:

- Completing a San Francisco Business Tax Registration, and
- Completing an Equal Benefits Declaration form.





San Francisco Business Tax Registration:

- 3. You should first attend to your Business Tax Registration Certificate with the Treasurer & Tax Collector's office. **Click on the San Francisco Business Tax Registration hyperlink**, which will bring you to the screen shown below (at <https://newbusiness.sfgov.org/vendor/>).

CCSF Supplier - Business Registration

Business Registration is required for all entities that conduct business in SF and determines your tax responsibilities. Upon establishment of your business, you will receive a Business Account Number (BAN) and a Business Certificate (to be posted in your location). In some cases, suppliers may not be required to register. To become a supplier, please visit: <http://sfcitypartner.sfgov.org>. You must have a Bidder/Supplier ID Number to complete this form.

Use this form to:

1. Determine if your business needs to register in San Francisco.
2. Register your business and/or link your existing business account to your Bidder/Supplier ID Number.
3. Declare that you do not need to register as a business in San Francisco.

Are you already registered?

Are you a registered business with a Business Account Number (or Business Registration Certificate)? If so, use the link provided to link your Bidder/Supplier ID Number to your Business Account Number [Click here to enter your BAN and Bidder/Supplier ID Number](#)

If you are not registered as a business:

Please answer "Yes" or "No" to the questions below to determine if you are required to register as a business with the Office of the Treasurer & Tax Collector.

Does this business:

- yes no • Operate as an independent contractor within San Francisco.
- yes no • Conduct business in SF for any part of seven (7) days during the fiscal year, including use of streets.
- yes no • Perform work or render services within San Francisco for all or part of any seven days during one fiscal year.
- yes no • Solicit business within San Francisco for all or part of any seven days during one fiscal year.
- yes no • Maintain a fixed place of business within San Francisco.
- yes no • Exercise corporate or franchise powers within San Francisco.
- yes no • Own or lease real or personal property within San Francisco for business purposes.
- yes no • Regularly maintain a stock of tangible personal property for sale in San Francisco.
- yes no • Employ or loan capital on property within San Francisco.
- yes no • Liquidate businesses when the liquidators hold themselves out to the public as conducting such business.
- yes no • Receive more than \$500,000 in total gross receipts in the City during the tax year.



4. **If your organization has already completed its Business Tax Registration with the Treasurer & Tax Collector's office, then click on the "Click here to enter your BAN and Bidder/Supplier ID Number" hyperlink.** You will then be taken to the screen shown below. Follow the steps on this screen to link your existing business registration with your Supplier Application.

Are you already registered?

Please use the space below to enter your Business Account Number. Once you confirm your Business Name, you will be prompted to enter your Supplier/Bidder ID Number.

Enter Business Account Number:

Business Name:

5. **If your business has not registered with the City before or if it needs to renew an existing registration, then answer the list of questions on the screen.**

5A. If your answer is **"No"** to all of these questions, the "Continue" button will appear. Click the "Continue" button and an "In-Lieu of Business Registration" form will appear that you will need to complete and submit.

If you are not registered as a business:

Please answer "Yes" or "No" to the questions below to determine if you are required to register as a business with the Office of the Treasurer & Tax Collector.

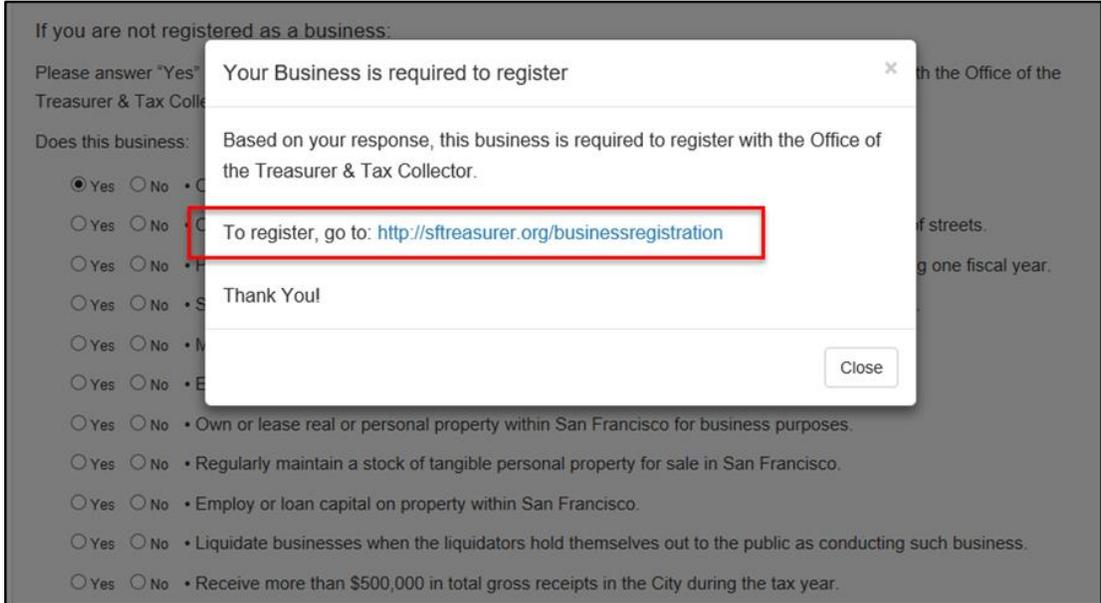
Does this business:

- Yes No • Operate as an independent contractor within San Francisco.
- Yes No • Conduct business in SF for any part of seven (7) days during the fiscal year, including use of streets.
- Yes No • Perform work or render services within San Francisco for all or part of any seven days during one fiscal year.
- Yes No • Solicit business within San Francisco for all or part of any seven days during one fiscal year.
- Yes No • Maintain a fixed place of business within San Francisco.
- Yes No • Exercise corporate or franchise powers within San Francisco.
- Yes No • Own or lease real or personal property within San Francisco for business purposes.
- Yes No • Regularly maintain a stock of tangible personal property for sale in San Francisco.
- Yes No • Employ or loan capital on property within San Francisco.
- Yes No • Liquidate businesses when the liquidators hold themselves out to the public as conducting such business.
- Yes No • Receive more than \$500,000 in total gross receipts in the City during the tax year.



5B. If you responded **“Yes”** to any question in the list, you will be required to register with the Office of the Treasurer & Tax Collector for a San Francisco Business Tax Registration certificate. In this case, click on the <http://sftreasurer.org/businessregistration> link shown below and follow the directions on the screen.

Steps 5C-5H show the registration form that you will need to complete.





5C. Complete the Ownership Information page.

Introduction Business Information **Ownership Information** Contact Information Location Information Registration Fees

Cancel / Exit X

Ownership Information

City and County of San Francisco
Office of The Treasurer & Tax Collector
Business Registration Application

Fields marked with * are required

Ownership Details

Owners have the authority to make changes to the business account.

Owner 1

Name (Sole proprietors, enter first & last name.) * Tax ID Number (SSN, FEIN, TIN) *

Telephone Email

Select Address Type *

Street Number * Pre-Direction Street Name * Street Type

Post Direction Unit Number Unit Type

City * State * Zip *

X Delete Owner

+ Add Owner

Go Back



5D. Complete the Contact Information page.

Introduction Business Information Ownership Information **Contact Information** Location Information Registration Fees

Cancel / Exit X

Contact Information

City and County of San Francisco
Office of The Treasurer & Tax Collector
Business Registration Application

*Fields marked with * are required*

Contact Details

Registration and tax information will only be mailed to the contact mailing address.

Clicking this button will copy the contact information for the first owner listed in Ownership Information.

Recipient Name *

Email * Confirm Email *

Telephone

Select Address Type *

Street Number * Pre-Direction Street Name * Street Type

Post Direction Unit Number Unit Type

City * State * Zip *



5E. Complete the Location Information page.

Introduction
Business Information
Ownership Information
Contact Information
Location Information
Registration Fees

[Cancel / Exit](#) ✕

Location Information

City and County of San Francisco
 Office of The Treasurer & Tax Collector
 Business Registration Application

Fields marked with * are required

Location Details

Each location name, fictitious business name ("FBN"), or DBA ("Doing Business As") name should be listed as a separate location. If the Location Name is the same as your Business Name, list your Business Name on this line.

Location 1

DBA/Trade Name *

Start Date in San Francisco (mm/dd/yyyy) *

Same as Ownership?

Clicking this button will copy the contact information for the first owner listed in Ownership Information.

Street Number * Pre-Direction Street Name * Street Type

Post Direction Unit Number Unit Type

City * State * Zip *

Taxes & Fees

Select all applicable taxes & fees for the particular location. For more information about taxes and fees, including Certificate of Authority, click [here](#).

Transient Occupancy Tax, Tourism Improvement District & Moscone Expansion District Fees *

The Transient Occupancy Tax generally is collected and remitted to the City by hotel operators and some Short Term Residential Rental Hosts. The TOT is also known as the hotel tax. The TID and MED fees are collected and paid by hotel operators only. There are additional requirements, including a Certificate of Authority.

Filing frequency: Typically Monthly

Short-Term Residential Rental Host *

Short-Term Residential Rental Host generally applies to any person who rents out of all or a portion of their residential unit for periods of less than 30 consecutive nights. If you select this category, you do not need to select TOT/TID/MED.



5F. Continue to answer the questions on the Contact Information page.

Parking Tax *

The Parking Tax generally is collected and remitted to the City by parking operators. There are additional requirements, including a Certificate of Authority, a Parking Bond, and Revenue Control Equipment.

Filing frequency: Typically Monthly

Access Line Tax *

The Access Line Tax generally is collected and remitted to the City by the person supplying the access line to the telephone communications services subscriber.

Filing frequency: Monthly

Utility Users Tax *

The Utility Users Taxes are collected and remitted to the City by utility service suppliers.

Filing frequency: Monthly

Telephone Users Tax *

The Telephone Users Tax is collected and remitted to the City by telephone communications services suppliers.

Filing frequency: Monthly

Sugary Drinks Tax *

The Sugary Drinks Tax is paid by distributors of sugary drinks.

Filing frequency: Quarterly

Traffic Congestion Mitigation Tax *

The Traffic Congestion Mitigation Tax is paid by commercial ride-share companies, and providers of rides in autonomous vehicles and private transit services vehicles.

Filing frequency: Monthly

Cigarette Litter Abatement Fee *

The Cigarette Litter Abatement Fee generally is collected and remitted to the City by cigarette retailers.

Filing frequency: Quarterly



5G. Continue to answer the questions on the Contact Information page.

Business Activities *

Business Activities – choose all that describe business activities at that location.

- 1 Accommodations [7210-7219]
- 2 Administrative and Support Services [5600-5699]
- 3 Arts, Entertainment, and Recreation [7100-7199]
- 4 Biotechnology
- 5 Certain Services [8100-8139]
- 6 Clean Technology
- 7 Construction [2300-2399]
- 8 Financial Services [5210-5239]
- 9 Food Services [7220-7229]
- 10 Information [5100-5199]
- 11 Insurance [5240-5249]
- 12 Manufacturing [3100-3399]
- 13 Private Education and Health Services [8100-8299]
- 14 Professional, Scientific, and Technical Services [5400-5499]
- 15 Real Estate and Rental and Leasing Services [5300-5399]
- 16 Retail Trade [4400-4599]
- 17 Transportation and Warehousing (Non Taxi) [4800-4999]
- 18 Utilities [2200-2299]
- 19 Wholesale Trade [4200-4299]
- 20 Activity Not Listed

Delete Location

Add Location

Go BackContinue



5H. Complete the Registration Fees page.

Introduction Business Information Ownership Information Contact Information Location Information **Registration Fees** Cancel / Exit X

Registration Fees

City and County of San Francisco
Office of The Treasurer & Tax Collector
Business Registration Application

Fields marked with * are required.

Registration

The information on this page, coupled with your selected Business Activity determines your Business Registration Fee.

Estimated San Francisco Payroll Expense *

Estimated San Francisco Gross Receipts *

Does this business receive rental income from four or more residential units in one building? *

Are you establishing the business to be a vendor/supplier or participate in procurement processes with the City and County of San Francisco? *

Are all of your business activities within San Francisco? *

Do you have taxable Business Personal Property in San Francisco? Business Personal Property is any tangible property owned, claimed, used, possessed, managed, or controlled in the conduct of a trade or business. This includes all machinery, fixtures, computers, appliances, equipment, and leasehold improvements. *

What is your average number of employees per week, including those employed outside of San Francisco? *

If you received a letter from the Office of the Treasurer & Tax Collector instructing you to register, enter the Correspondence ID from the top right corner of the letter here:

Are you Exempt from paying Registration Fee? *

Review information on all pages before advancing. No changes can be made after the form is submitted



51. If you have questions on the tax registration forms, the Treasurer & Tax Collector Help Center can be accessed via <https://sftreasurer.org/help-center> or via 311 (or 415-701-2311).

The screenshot shows the 'Treasurer & Tax Collector' website for the City and County of San Francisco. The page is titled 'Help Center'. It includes a search bar and navigation links for 'Help Center', 'Find a Form', 'About Us', and 'English'. The main navigation menu includes 'Property', 'Business', 'Banking & Investments', 'Office of Financial Empowerment', and 'Financial Justice Project'. The 'Help Center' section contains the following text:

The Office of the Treasurer & Tax Collector has partnered with 311 to provide customer service to all San Francisco residents, businesses and visitors. Submit your question by selecting an option below and a representative will contact you on the same day of the request if submitted prior to 7pm. Requests received after 7pm will receive a response by the next business day.

The City and County of San Francisco, the SF311 Customer Service Center and The Office of the Treasurer & Tax Collector can only provide general information and cannot advise customers on detailed tax matters. This includes ordinance interpretations and tax calculations of payment or fees. Consult your own tax professional, attorney, or Certified Public Accountant for specific information.

The page is organized into three columns:

- Property:** Secured, Supplemental, Escape (Residential, Commercial, Land); Unsecured (Business Personal Property, Boats/Berths, Possessory Interest); Delinquent (Redemption). Button: Ask a Property question.
- Business:** Registration; Gross Receipts and Payroll Expense; Regulatory Licenses and Permits; Short Term Residential Rentals; Independent Contractors Registration. Button: Ask a Business question.
- General:** General Information; Business Tax Wire Instructions; Property Tax Wire Instructions; Press Inquiries; Emergency and False Alarm. Button: Ask a General question.

6. Once your Business Tax Registration has been processed and entered into our system, your Bidder ID will be converted to a Supplier ID and you will receive a notification with your new Supplier ID Number. At this point you will be listed as a Supplier and your login will now direct you to your business' Supplier account (and not your old Bidder account). However, you will still need to be verified as complying with the Equal Benefits Administrative Code to be fully awarded any contracts.



Equal Benefits Ordinance Declaration:

7. *Equal Benefits Ordinance, formerly known as Chapter 12B

Next, you will need to submit your Equal Benefits Declaration. Articles 131-132 of the San Francisco Labor and Employment Code (the Equal Benefits Declaration) requires firms that provide goods or services to the City and County of San Francisco to administer benefits equally to employees with domestic partners and employees with spouses. This declaration is part of the process of verifying that your business complies with this Administrative Code.

View Opportunities View Partner Requests LBE Directory Help - Log In/Register

Become a Supplier

A guide to becoming a Fully Compliant Supplier.

First become a Registered Bidder...

The first step to begin working with the City is to [complete a short registration process](#) to become a "Registered Bidder". This will allow you to view and bid on Sourcing Events.

...then Become a Fully Compliant Supplier

After becoming a Registered Bidder, you can then advance your status to become a Fully Compliant Supplier, which allows you to be fully awarded City contracts. The steps to do this are as follows:

- 1 Complete a [San Francisco Business Tax Registration](#)
- 2 Complete an [Equal Benefits Declaration](#)

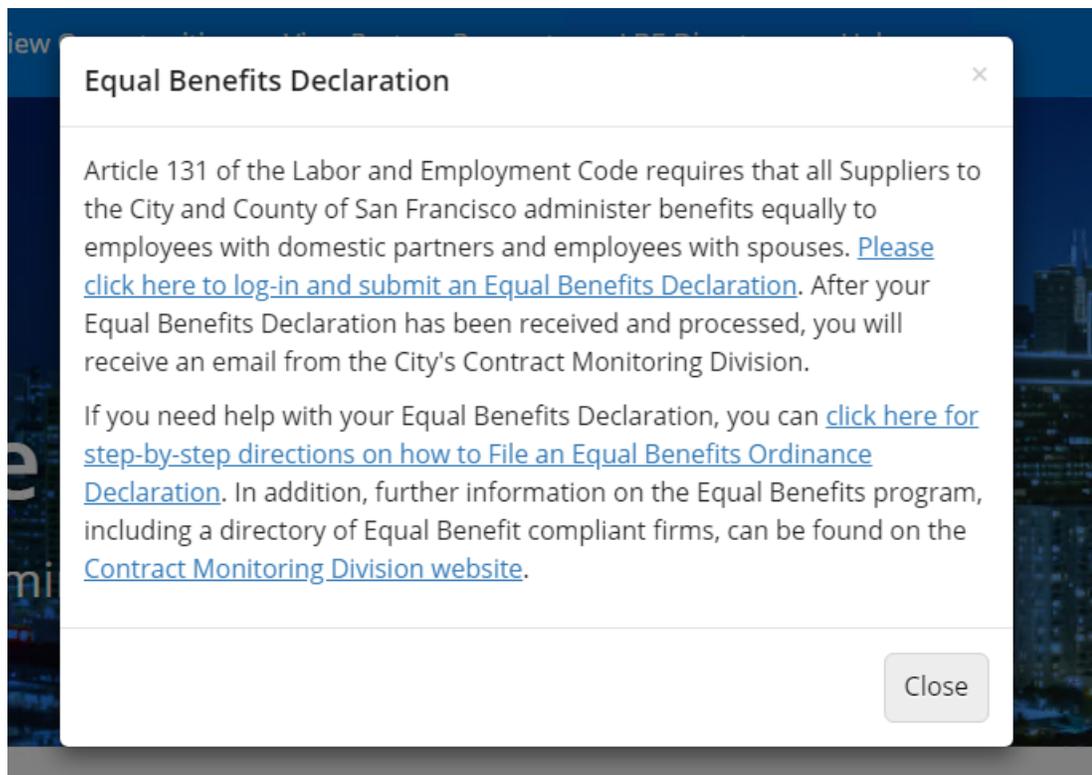
In addition to the hyperlinked directions above, you can click here to view step-by-step directions on [How to Become a Fully Compliant Supplier](#).

Additional Programs and Forms that may apply to you as you work with the City include the following:

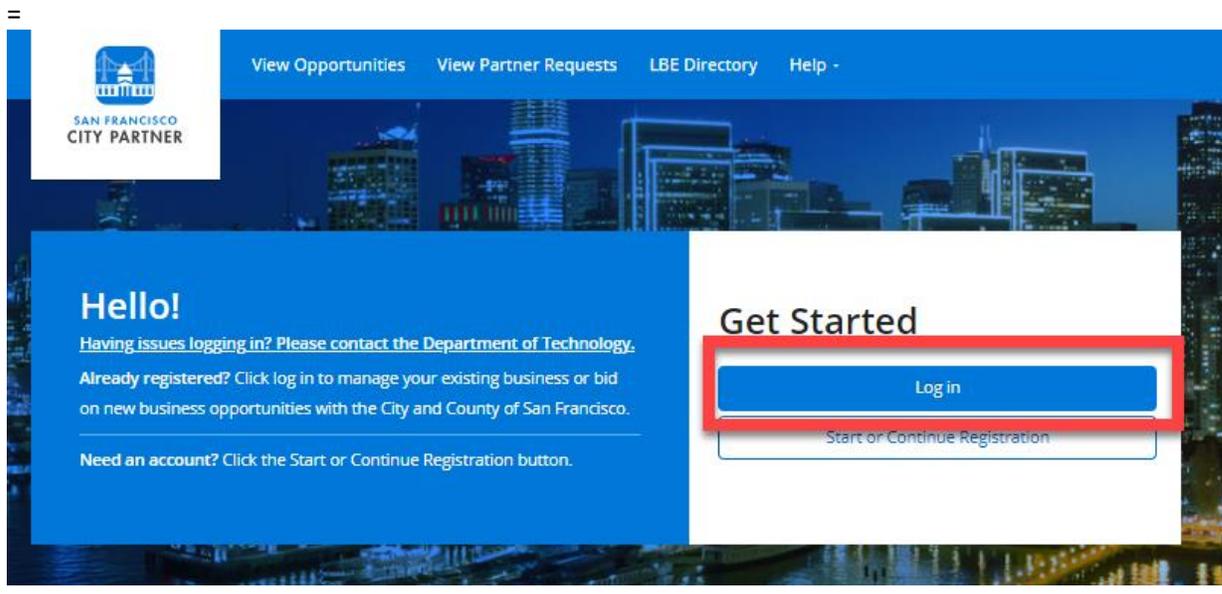
- OPTIONAL 14B LBE Certification for Small Local Businesses
- Requirements Based on Your Annual Business with the City
- Contract-Related Requirements
- First Source Hiring Program



8. From the Become a Supplier page on the SF City Partner website, **click on the Equal Benefits Declaration hyperlink**. Then, in the pop-up box shown below, click on the **Please click here to log-in and submit an Equal Benefits Declaration** hyperlink.



9. You'll then be taken to the log-in page shown below. **Click Log in to start the log-in process**. Please look to the "How to Log In to the SF City Partner Website" job aid for details if you are having issues with this login process.





10.

After you have logged into the system, you should be taken directly to the equal Benefits Declaration page. If you land on the main Workcenter page instead, **click on the Equal Benefits Declaration hyperlink.**

The screenshot shows the San Francisco City Partner Workcenter interface. At the top, there is a navigation bar with the following items: 'View Opportunities', 'View Partner Requests', 'LBE Directory', and 'Help'. On the right side of the navigation bar, it says 'FEB6SP' and 'BIDDER'. Below the navigation bar is a banner for 'Find an Opportunity' with the text 'View and Bid on Events' and 'Anyone can view City business opportunities. Jump ahead to search now.' A blue 'Get Started' button is located on the right side of this banner. Below the banner is a notification banner that reads: 'You are a Registered Bidder. Upgrade your account now to become a Fully Compliant Supplier.' The main content area is divided into several sections: 'Announcements' with a message 'Please limit attachments to 20MB and 64 character file names' dated February 15, 2023; 'My Account' with links for 'My Categories & Alerts', 'Edit my Profile', 'Edit the Business Owner's Demographic Information', 'Upload IRS W-9 form', 'Change Password/MFA', and 'SF Lends | Treasurer & Tax Collector'; 'My Activity' with links for 'View Opportunities' and 'View My Activity'; 'Certifications' with a red box highlighting the 'Equal Benefits Declaration' link and a link for '149 LBE Certification'; and 'Additional Information' with a link for 'View Terms & Conditions'.



11.

Click on the Add a New Value tab. The fields on this page should already be prepopulated with the SetID field showing “SHARE”, the Declaration Number field showing “NEXT”, the Declaration Type showing “Bidder”, and the Bidder ID field showing your Bidder Account number. **Click “Add”** and you will be brought to the Equal Benefits Compliance Declaration page, which is shown in the following four screens.

Equal Benefits Declaration

The screenshot shows a web form titled "Equal Benefits Declaration". At the top, there are two tabs: "Find an Existing Value" and "Add a New Value". The "Add a New Value" tab is highlighted with a red box. Below the tabs, the form contains several fields: "*SetID" with the value "SHARE", "Declaration Number" with the value "NEXT", "Declaration Type" with a dropdown menu showing "Bidder", "Supplier ID", "Bidder ID" (with a search icon), and "Legacy Vendor ID". At the bottom left of the form, there is a yellow "Add" button, which is also highlighted with a red box. Below the form, there are two links: "Find an Existing Value" and "Add a New Value".



12.

In the top part of the Equal Benefits Declaration, you will see the Articles 131-132 of the San Francisco Labor and Employment Code section and the Required Supporting Documentation.

Equal Benefits Declaration

Declarant Name	[REDACTED]	Supplier ID	[REDACTED]
Declaration Number	[REDACTED]	Legacy Vendor ID	[REDACTED]
Declaration Type	Supplier		
Workflow Status	Draft		

Articles 131-132 of the San Francisco Labor and Employment Code

The Equal Benefits requirement in San Francisco contracting is set forth in Articles 131-132 of the San Francisco Labor and Employment Code. The City and County of San Francisco shall contract with entities that do not discriminate in the provision of benefits between employees with domestic partners and employees with spouses, and between the domestic partners and spouses of such employees.

Discrimination is not permitted on the basis of the fact or perception of a person's membership in the following categories: race, color, religion, national origin, ancestry, age, sex, sexual orientation, gender identity (including transgender identity), domestic partner status, marital status, disability, AIDS/HIV status, height, or weight.

DOMESTIC PARTNERS

- Domestic Partners are same-sex and opposite-sex couples registered with any state or local government domestic partner registry authorized to perform such registrations.
- Domestic partnerships and marriages may only be verified to the same extent and in the same manner. For example, waiting periods to qualify for benefits must be the same for domestic partners and spouses. If proof of relationship is required, domestic partner registry certificates must be accepted as fully equivalent to marriage certificates. Affidavits of domestic partnership may only be required if affidavits are required to verify marriages.

REQUIRED SUPPORTING DOCUMENTATION

To comply with the Equal Benefits Ordinance, submit complete supporting documentation confirming that equal benefits have been fully implemented for employees with spouses, employees with domestic partners, and the spouses and domestic partners of such employees.

The following documentation must be submitted to complete this Declaration:

- ✓ **Most recent legal verification of employee count or legal verification there are no employees.**
 - Such verification may include tax forms that report the number of W-2s filed.
 - Examples of acceptable documents: Form 941, Form W-3, W-2 and Earnings Statement, Form 990, Form 1040 Schedule SE, Form SS-4, Form DE 9C, Annual San Francisco Payroll Expense Tax Statement.
 - *Please redact confidential information.*
- ✓ **Verification of compliant nondiscrimination and benefit policies.**
 - This may take the form of a memorandum that has been distributed to all employees summarizing equal administration of all benefit and nondiscrimination policies.
 - [Click here](#) for more information on documenting equal benefit policies.
 - *Important note:* The memorandum is not a substitute for fully compliant incorporation of domestic partner language throughout all benefit policies. The memorandum is intended to support existing benefit documentation by highlighting equality in benefit administration as it pertains to domestic partner policies.
 - If a memorandum is not submitted, individual policies must be submitted for all benefits offered that demonstrate complete incorporation of domestic partner language wherever spouses and their family members are referenced.
 - For assistance completing this form, call the Contract Monitoring Division Equal Benefits Unit at (415) 554-0630.



<p>13.</p>	<p>In the “Company Information” and “Compliance Question” sections, fill in the following:</p> <ul style="list-style-type: none">• No. of Employees in the U.S. Enter the number of employees your business has. Enter zero if you are an individual providing services to the City (with no additional employees).• Add Attachment: You will need to upload legal verification of your employee count and firm structure. This legal verification can include a W-3 Form, DE-1 Form, DE-9 Form, or an annual San Francisco Payroll Tax Statement. If you need help with what documents you can use here, please contact the Contract Monitoring Division’s Equal Benefits Unit at CMD.EqualBenefits@sfgov.org.• Are any of your employees covered by a collective bargaining agreement or union trust fund: Select Yes or No for this question. If yes, specify the Union Name in the box provided.• Select a default address location and contact:<ul style="list-style-type: none">• In the Address section, put a checkmark in front of one of your addresses to designate it as the default location.• In the Contact section, put a checkmark in front of one of your contacts to designate that person as the default contact.• Compliance Question: Carefully read and answer the compliance questions.
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SECTION 1: COMPANY INFORMATION

*Taxpayer ID Categories Taxpayer Identification Number 941499330
 Total Number of Employees in the U.S.
 (Enter approximate number; business owners should not count themselves as employees.)
 Attach legal verification of total employee count (required for all businesses)
 Are any of your employees covered by a collective bargaining agreement or union trust fund? Yes No
 Union Name(s)
 Declarant Web Site

Address Information				Personalize	Find	First	1-3 of 3	Last
Description	Address 1	Address 2	City	State	Country	ZIP		
<input type="checkbox"/>				CA	USA			
<input type="checkbox"/>				CA	USA			
<input type="checkbox"/>				CA	USA			

Contact Information				Personalize	Find	First	1-10 of 10	Last
Description	Name	Phone	Email					
<input type="checkbox"/>	Contact		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	Contact		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	Supplier Admin		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	Supplier Admin		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	Supplier Admin		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	SUPPLIER ADMIN		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	SUPPLIER ADMIN		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	SUPPLIER ADMIN		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	SUPPLIER ADMIN		PeopleSoftTesting@sfgov.org					
<input type="checkbox"/>	SUPPLIER ADMIN 10		PeopleSoftTesting@sfgov.org					

SECTION 2: COMPLIANCE QUESTIONS

Question 1: Nondiscrimination - Protected Classes

- A. Does your firm agree it will not discriminate against its employees, applicants for employment, employees of the City, or members of the public on the basis of the fact or perception of a person's membership in the following categories?
- Race, Color, Creed, Religion, National Origin, Ancestry, Age, Sex, Sexual Orientation, Gender Identity (Transgender Status), Domestic Partner Status, Marital Status, Disability, AIDS / HIV Status, Height, Weight.*
- Please note: a YES answer is required for compliance.**
- B. Does your firm agree to insert a similar nondiscrimination provision in any subcontract you enter into for the performance of a substantial portion of the contract you have with the City?

Yes No

Yes No



14.	In the “Benefits Question” section, carefully read and answer the questions and click on the appropriate Type of Benefit options. Check all the benefits that apply. Use the “Other” lines to add in any additional benefits that are not specified.
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SECTION 2: COMPLIANCE QUESTIONS



Question 1: Nondiscrimination - Protected Classes

A. Does your firm agree it will not discriminate against its employees, applicants for employment, employees of the City, or members of the public on the basis of the fact or perception of a person's membership in the following categories?

Race, Color, Creed, Religion, National Origin, Ancestry, Age, Sex, Sexual Orientation, Gender Identity (Transgender Status), Domestic Partner Status, Marital Status, Disability, AIDS / HIV Status, Height, Weight.

Please note: a YES answer is required for compliance.

B. Does your firm agree to insert a similar nondiscrimination provision in any subcontract you enter into for the performance of a substantial portion of the contract you have with the City?

Please note: You must answer this question even if you do not intend to enter into any subcontracts, and a YES answer is required for compliance.

Yes No

Yes No



Question 2: Nondiscrimination - Equal Benefits for (i) Employees with Spouses and (ii) Employees with Domestic Partners and (iii) Employee's Spouse or Domestic Partner.

→ Questions 2A and 2B should be answered YES even if your employees pay some or all of the cost of spousal or domestic partner benefits.

A. Does your firm provide or offer access to any employee benefits? (If your firm does not have any employees, answer NO)

Yes No

B. If you answered YES to 2A, are all of the benefits equally available to employees with domestic partners and employees with spouses? (If your firm does not have any employees, answer NO)

Yes No

→ If you answered YES to either or both Questions 2A and 2B, please go to Question 2C.

→ If you answered NO to both Questions 2A and 2B, please go to SECTION 3.

C. Check all benefits that apply to your answers above and list in the "Other" line any additional benefits not already specified. Note: some benefits are provided to employees because they have a spouse or domestic partner, such as bereavement leave; other benefits are provided directly to the spouse or domestic partner, such as dependent life insurance.

Benefit	Available To and/or Affects			How Does This Apply to Domestic Partners (DPs) and Spouses (SPs)?
	Employee	Domestic Partner	Spouse	
Health Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Dental Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Vision Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Pension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Retirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Bereavement Leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Family Medical Leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Parental Leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Employee Assistance Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Relocation and/or Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Discounts/Facilities/Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Credit Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Dependent Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Short-Term/Long-Term Disability Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Accidental Death & Dismemberment Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Other <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Other <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?
Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	?



<p>15.</p>	<p>Carefully read and answer the questions in the “Company Benefit Policy” section.</p> <p>The “Other Supporting or Required Documentation” section can be used to upload additional supporting documents for your Equal Benefits Declaration.</p> <p>The “Comments” section can be used to add additional information.</p> <p>Read the agreement language and click “Submit” when your Equal Benefits Declaration is completed. If you need to save your progress and return later, you can click on the “Save” button.</p>
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D. Indicate whether each statement applies to your firm.

Domestic partners are defined as same-sex couples and opposite-sex couples registered with any state or local registry, and verify their relationship in the same manner as spouses.

A memorandum highlighting our domestic partner policies has been distributed to employees.

All written benefit policies include domestic partner policies wherever spouses are referenced.

The children of domestic partners are explicitly included in all policies that recognize stepchildren.

All insurance plans contain language that fully recognizes spouses and domestic partners equally.

All retirement/401(k)/similar plans that allow beneficiaries explicitly provide the same distribution choices for spousal and domestic partner ("nonspousal") beneficiaries.

Yes No

Yes No

Yes No

Yes No

Yes No

Yes No

Note: If you can't offer a benefit in a nondiscriminatory manner of reasons outside your control, e.g., there are no insurance providers in your area willing to offer domestic partner coverage, you may be eligible for Reasonable Measures compliance. To comply on this basis, you must agree to pay a cash equivalent, submit a completed Reasonable Measure Application Form (CMD-12B-102) with all necessary attachments, and have your application approved by the Contract Monitoring Division. For more information, contact the [Equal Benefits Unit](#).

ATTACHMENTS

File Name	Description	User Name	Date/Time Stamp
1			

Personalize | Find | | | First 1 of 1 Last

COMMENTS

SECTION 3: EXECUTE THIS EQUAL BENEFITS DECLARATION

COMPLIANCE AUDITS

The City and County of San Francisco audits firms to verify that the answers on this form are complete and accurate.

Upon audit, you may be required to provide benefit documentation to verify nondiscrimination in the provision of each benefit. Such documentation may include the employee handbook and confirmations from your insurance, union and retirement documents.

Failure to offer benefits in accordance with the San Francisco Labor and Employment Code Articles 131-132 may result in suspension of compliance status, financial penalties and/or the inability to contract with the City and County of San Francisco.

By clicking the Submit button, I declare under penalty of perjury under the laws of the State of California that the foregoing is correct, and that I am authorized to bind this entity contractually.

Created By: _____ Last Updated By: _____
 Created On: _____ Last Updated On: _____



<p>16.</p>	<p>After you have submitted your Equal Benefits Declaration, the system will generate a Declaration Number, which will show at the top of your Equal Benefits form. We suggest that you now print or download a copy of your Equal Benefits Declaration for your records.</p> <p>You will now need to wait for the City’s Contract Monitoring Division to process your Equal Benefits Declaration. They will notify you by email when they have made a compliance determination.</p> <div data-bbox="259 430 1461 630" style="border: 1px solid #ccc; padding: 5px;"> <p>Equal Benefits Declaration</p> <table border="0"> <tr> <td>Declarant Name</td> <td>[Redacted]</td> <td>Supplier ID</td> <td>[Redacted]</td> </tr> <tr> <td>Declaration Number</td> <td>[Redacted]</td> <td>Legacy Vendor ID</td> <td>[Redacted]</td> </tr> <tr> <td>Declaration Type</td> <td>Supplier</td> <td></td> <td></td> </tr> <tr> <td>Workflow Status</td> <td>Submitted</td> <td></td> <td></td> </tr> </table> </div>	Declarant Name	[Redacted]	Supplier ID	[Redacted]	Declaration Number	[Redacted]	Legacy Vendor ID	[Redacted]	Declaration Type	Supplier			Workflow Status	Submitted		
Declarant Name	[Redacted]	Supplier ID	[Redacted]														
Declaration Number	[Redacted]	Legacy Vendor ID	[Redacted]														
Declaration Type	Supplier																
Workflow Status	Submitted																

<p>17.</p>	<p>More information on the Equal Benefits program, can be found on the Contract Monitoring Division website at https://www.sf.gov/departments/contract-monitoring-division.</p>
<p>18.</p>	<p>If you have any questions about the Equal Benefits process, you can contact the Equal Benefits Unit for the Contract Monitoring Division (CMD) at CMD.EqualBenefits@sfgov.org; 415.554.0630.</p>



OPTIONAL - 14B Local Business Enterprise Certification:

19. OPTIONAL - The 14B Local Business Enterprise (LBE) Certification is available to small businesses with a headquarters in San Francisco or the PUC Regional Service area. For information about the LBE criteria for eligibility, go to <https://sfgov.org/cmd/LBE-certification-0>.

Please note that businesses that do not qualify for 14B status should NOT fill in a 14B certification form. For full information about the 14B Local Business Enterprise (LBE) ordinance, go to the Contract Monitoring Division website at <https://sfgov.org/cmd/14b-local-business-enterprise-ordinance>.





20.

Become a Supplier
A guide to becoming a Fully Compliant Supplier.

First become a Registered Bidder...

The first step to begin working with the City is to [complete a short registration process](#) to become a "Registered Bidder". This will allow you to view and bid on Sourcing Events.

...then Become a Fully Compliant Supplier

After becoming a Registered Bidder, you can then advance your status to become a Fully Compliant Supplier, which allows you to be fully awarded City contracts. The steps to do this are as follows:

- 1 Complete a [San Francisco Business Tax Registration](#)
- 2 Complete an [Equal Benefits Declaration](#)

In addition to the hyperlinked directions above, you can click here to view step-by-step directions on [How to Become a Fully Compliant Supplier](#).

Additional Programs and Forms that may apply to you as you work with the City include the following:

- [OPTIONAL 14B LBE Certification for Small Local Businesses](#)
- [Requirements Based on Your Annual Business with the City](#)
- [Contract-Related Requirements](#)
- [First Source Hiring Program](#)
- [Insurance](#)
- [Payment \(Labor and Material\) Bond](#)
- [Performance Bond](#)
- [Sweatfree Contracting Ordinance](#)

From the Become a Supplier page on the SF City Partner website, **click on the OPTIONAL 14B LBE Certification for Small Local Businesses hyperlink**. Then, in the pop-up box shown below, click on the **Please click here to log-in and submit a 14B Certification** hyperlink.



	<div data-bbox="451 193 1279 741"><h3>14B LBE Certification for Small Local Businesses</h3><p>If your small business is headquartered in San Francisco or other eligible areas (the PUC Regional Service area), we recommend you take advantage of 14B LBE Certification, which assists small businesses competing for City business. Please click here to log-in and submit a 14B Certification.</p><p>If you need help with your 14B certification, you can click here for step-by-step directions on how to File an Optional 14B Local Business Enterprise Certification. In addition, further information on the 14B LBE Ordinance, including a directory of certified LBE firms, can be found on the Contract Monitoring Division website.</p><p>Close</p></div>
<p>21.</p>	<p>If you have not logged in already, you will need to log-in. Please look to the “How to Log Into the SF City Partner Website” job aid if you are having issues with this login process.</p>



22.

After you have logged in, you should be taken directly to the 14B Certification page. If you land on the main Workcenter page instead, **click on the 14B Certification hyperlink.**

View Opportunities **View Partner Requests** **LBE Directory** **Help** **BIDDER**

SAN FRANCISCO CITY PARTNER

Find an Opportunity

View and Bid on Events

Anyone can view City business opportunities. Jump ahead to search now.

Get Started

TESTUSER71924 | TESTUSER71924 | B000037037

[You are a Registered Bidder. Upgrade your account now to become a Fully Compliant Supplier.](#)

Announcements

Please limit attachments to 20MB and 64 character file names

February 15, 2023

My Account

- [My Categories & Alerts](#)
- [Edit my Profile](#)
- [Upload IRS W-9 form](#)
- [Change Password/MFA](#)
- [SF Lends | Treasurer & Tax Collector](#)

My Activity

- [View Opportunities](#)
- [View My Activity](#)

Certifications

- [Equal Benefits Declaration](#)
- 14B LBE Certification**

Additional Information

- [View Terms & Conditions](#)

Notice of Intent

Notice of Intent to Award Bid Proposal
000009907 OCA DPH | Midsize Electric Vehicles - Grant-Funded



23. On the 14B Certification Application page, **click on the Add a New Value tab.** The fields on this page should already be prepopulated with the SetID field showing “SHARE”, the Application Number field showing “NEXT”, the Applicant Type showing “Bidder”, and the Bidder ID field showing your Bidder Account number. **Click “Add”** and you will be brought to the 14B Certification Application page, which is shown in the following four screens.

24. In the top part of the 14B Certification Application, mark down the Application Type, answer the questions on the page, upload related attachments when indicated.

14B Certification Application

Applicant Name *Company Name Applicant ID "Bidder ID#"
 Application Number NEXT Applicant Type Bidder
 Application Status Draft

*Indicates required field

*Application Type Initial Certification

*Please select the statement that accurately represents your organization.

- My company has a primary place of business located in San Francisco.
- My organization is a Nonprofit Enterprise and has a primary place of business located in San Francisco.
- My company has a primary place of business outside of San Francisco, but within the "SFPUC Water System Service Area" and is seeking to participate in PUC Hetch Hetchy projects.

Please indicate whether your business is a San Francisco Green Business. Yes No

Provide a copy of your Green Business Program Recognition Certificate. **Add Attachment**

*Tax Identification Number "#####"
 *Business Type

*Provide verification of your business type as applicable. Partnerships, provide your partnership agreement. Corporations, provide your Articles of Incorporation. LLCs, provide your Articles of Organization. Non-profits, provide your IRS determination letter confirming 501(c)(3) exemptions status and your most recently filed California Attorney General Registration Renewal Fee Form (RRF-1). **Add Attachment**

Incorporation/
 Commencement Date

State Incorporated



25. In the “Location and Contact Information” part of the 14B Certification Application, use the checkboxes to indicate the default Primary Place of Business, Vehicle Parking Address, Mailing Address, and Certification Contact. Also answer the two questions on the page and upload any required attachments.

Location and Contact Information

***Primary Place of Business**
 Provide verification of your primary place of business.

Address List					
Description	Address 1	Address 2	City	State	Zip Code
<input type="radio"/> Main	"Main Address"		"City"	CA	#####
<input type="radio"/> Other	"Second Address"		"City"	CA	#####

Check all that apply Home Office Own Lease

*Provide verification of your primary place of business. If you lease the property, provide your lease or other written agreement and proof of a recent rent payment. If you own the property, provide proof of ownership (e.g. property tax bill, deed of trust).

*Provide verification of your additional business locations. If you lease the property, provide your lease or other written agreement and proof of a recent rent payment. If you own the property, provide proof of ownership (e.g. property tax bill, deed of trust).

***Trucker/Hauler** Yes No

Vehicle Parking Addresses
 Identify any business locations used to park business vehicles. If your vehicles are parked on the street, do not select any business locations.

Address List					
Description	Address 1	Address 2	City	State	Zip Code
<input type="checkbox"/> Main	"Main Address"		"City"	CA	#####
<input type="checkbox"/> Other	"Second Address"		"City"	CA	#####

Provide verification of your business locations used for vehicle parking. If you lease the property, provide your lease or other written agreement and proof of a recent rent payment. If you own the property, provide proof of ownership (e.g. property tax bill, deed of trust).

***Mailing Address**

Address List					
Description	Address 1	Address 2	City	State	Zip Code
<input type="radio"/> Main	"Main Address"		"City"	CA	#####
<input type="radio"/> Other	"Second Address"		"City"	CA	#####

***Certification Contact**

Contact List			
Description	Name	Business Phone	Email
<input type="radio"/>	"Contact Name #1"	"Contact Phone #1"	PeopleSoftTesting@sfgov.org
<input type="radio"/>	"Contact Name #2"	"Contact Phone #2"	PeopleSoftTesting@sfgov.org
<input type="radio"/>	"Contact Name #3"	"Contact Phone #3"	PeopleSoftTesting@sfgov.org



26. Answer the questions and upload any required documentation in the “Organization Information” section.

Organization Information

*Provide verification of six months of continuous operation. Provide your current San Francisco Business License. Truckers and Haulers, provide your DMV Motor Carrier Permit and proof of ownership (e.g. registration and title) for each vehicle in your fleet. Add Attachment

Complete the table below for anyone who is an officer of the corporation (e.g. president, vice president, secretary, treasurer).

*Owner/Shareholder	*Title	*Years with Company	*Ownership %	Professional and/or Contractor Licenses	City Employee	Ethnicity	Female?	LGBT	Disabled Veteran
					<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Provide proof of ownership percentages (e.g. most recent K-1 Schedules) for the owners and principals as identified. Add Attachment

Has any owner, partner, or officer of your firm operated a firm under any other name in the last five years?
 Please provide clarification. ▼

For any person listed in the table above that has been associated with a firm as an owner, general partner, limited partner, or officer at any time during the last five years, identify the person, firm and date range of association. In this context of this question, “owner” and “partner” refer to ownership of 10% or more of the business or 10% or more of its’ stock if the business is incorporated.

Name	Construction Firm	Begin Association	End Association

Has there been any change in ownership of the firm at any time during the past five years?
 Please provide clarification. ▼

Are any of the owner/shareholders identified full time employees for another business?
 Please provide clarification. ▼

*Provide the three most recently filed federal income tax returns for your business. Submit only the first page of Form 1120, 1120S or 1065, OR 1040 Schedule C, depreciation schedules, and K-1 schedules, if any. Add Attachment

*Provide the three most recently filed personal income tax returns for each owner identified. Submit only the first two pages (i.e. Form 1040, signature page), depreciation schedules, and Schedules C, E and F, if any. Add Attachment

OPTIONAL-Provide proof of gender or nationality (e.g. passport, driver’s license, birth certificate) for each owner / principal identified as a Female or Ethnic Minority. Add Attachment

OPTIONAL-Provide proof of LGBT certification with the National Gay and Lesbian Chamber of Commerce for each owner/principal identified as LGBT. Add Attachment

OPTIONAL-Provide proof of DVBE certification with the State of California Department of General Services for each owner/principal identified as a Disabled Veteran. Add Attachment



27. Answer the questions and upload any required documentation in the “Board of Directors” and “Employee Information” sections.

In the “Certification Categories” section, open up the applicable folders on the left-hand side of the page to find and click on the categories that relate to the goods and services your business provides. As you click these categories, you should see them become listed on the right-hand side of the page. Upload related documentation.

Use the “Other Comments and Attachments” section to upload any additional files and give additional commentary.

Click “Submit” when your 14B Certification form is completed. If you need to save your progress and return later, you can click on the “Save” button.

Board of Directors

*Name	*Term	*Place of Residence	Professional and/or Contractor Licenses	City Employee
1				<input type="checkbox"/>

Provide the three most recently filed federal Form 990, 990-N, or 990EZ for your non-profit organization. [Add Attachment](#)

Provide the three most recently filed Form 199, California Exempt Organization Annual Information Return, or Form 109, California Exempt Organization Business Income Tax Return, for your non-profit organization. [Add Attachment](#)

Employee Information

How many employees does your company have?

*Indicate whether your business paid wages last year.

Certification Categories

*Identify the goods and services that you provide. Click the category to select or to deselect.

Left | Right

- ALL - All Categories
- GC - Class A and B General Contract
- SC - Specialty Construction Contrac
- TH - Trucking and Hauling
- GME - Goods, Materials, and Equipmen
- GSP - General Service Providers
- AE - Architects and Engineers
- PS - Professional Services

My Requested Certification Categories

Category	Description

Provide invoices with contracts signed by your clients to verify your ability to provide the goods and services for which you are seeking certification. Provide three examples for each category identified for certification. [Add Attachment](#)

Other Comments and Attachments

Attachments

Attached File	File Description	View
1		View

[Add Attachment](#)

Comments

Affadavit

By clicking submit, I declare and swear under penalty of law that the statements made in this application are true, correct, and complete. I further agree to permit audits and examination of the books, records and files of the named firm to verify the information submitted in this application. Any material misrepresentation will be grounds for initiating criminal and civil actions under federal, state, and local laws and for terminating any contract awarded pursuant to this Certification.

Expand All Collapse All

Created By "Contact Person" Last Modified By

Created Date/time 07/10/2018 10:16AM Last Modified Date/time

[Save](#) [Submit](#) [Cancel](#)



28.

14B Certification Application ✕

Your application to the 14B Local Business Enterprise (LBE) program has been submitted. An email confirming submission will be sent to you.

If you need additional assistance, please contact lbecert@sfgov.org or 415-554-0630.

Return

After you have submitted your 14B Certification, the system will show a pop-up box indicating that your application has been submitted. Click the Return button on this pop-up box. The system will now generate an Application ID Number for your 14B Certification Application, which will show at the top of your 14B form. We suggest that you now print or download a copy of your 14B Certification Application for your records.

You will now need to wait for the City to process and approve your 14B Certification. They will send you an email when they have completed their 14B processes.

14B Certification Application

Applicant Name	"Company Name"	Applicant ID	"#####"
Application Number	"#####"	Applicant Type	Bidder
Application Status	Submitted		

29. Questions?

If you have any questions related to the SF City Partner system, contact User Support at 415.944.2442 or via email at sfcitypartnersupport@sfgov.org.

If you have any questions about the 14B criteria for certification, please contact the Contract Monitoring Division (CMD) at 415.554.0630 or via email at lbecert@sfgov.org.