

# Welcome to the MBE/WBE Certification online

## New users: Request an Account

Visit [erie.gov/mbewbecertification](http://erie.gov/mbewbecertification)

Click the link to request an account



## Request Account

[Request an account to create an MBE/WBE Certification application](#)

[Instructions for using this system](#)



Fill out the requested information and hit **Submit**. You'll receive a confirmation message on the screen.



## Request Access

Fill out this form to request an account to create an MBE/WBE Certification application.

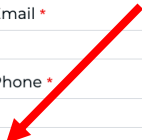
Full legal name of the enterprise \*

Contact Name \*

Contact Email \*

Contact Phone \*

Submit



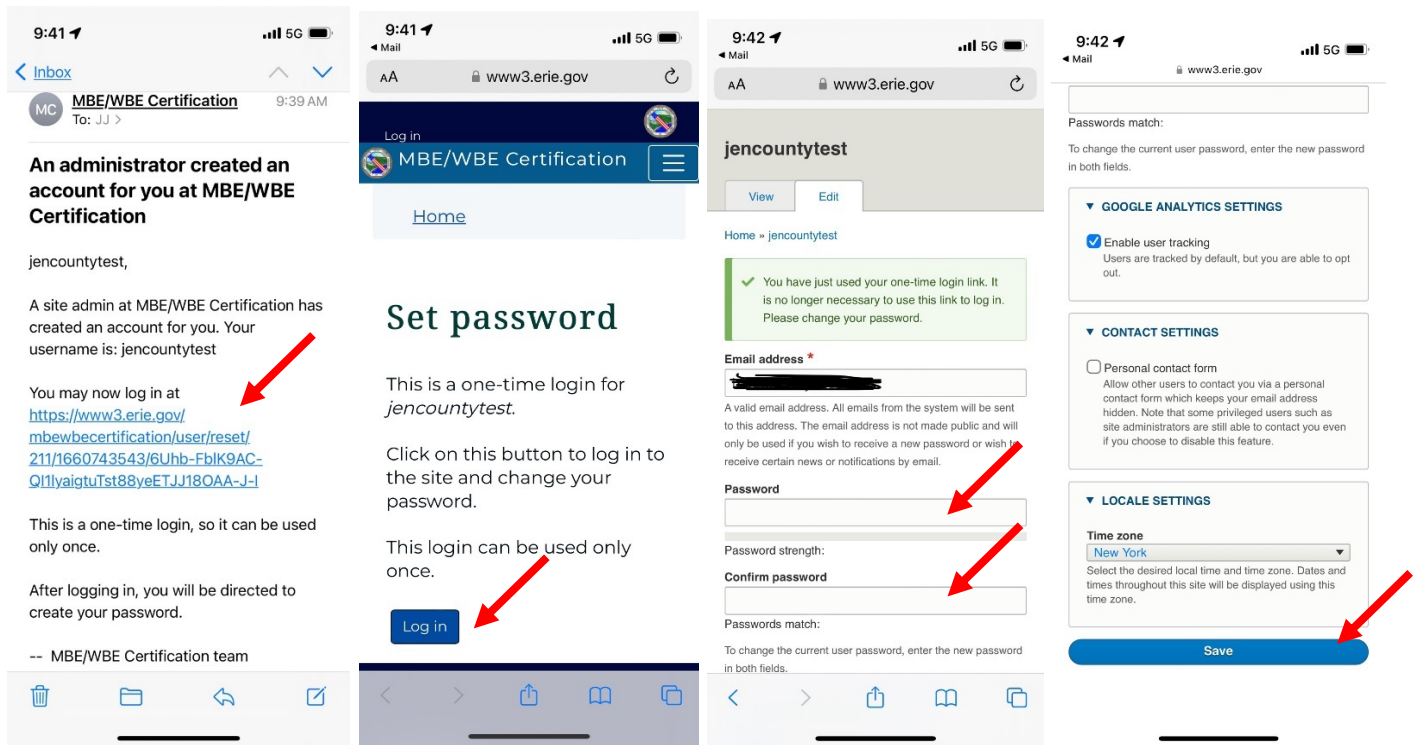
## Request Access

Thank you. After we review your request, you will receive an email at the address you provided with instructions on logging in to the system to fill out your application.

[Back to form](#)



You will receive an email instructing you to log in and set a password.



You may now proceed with completing an application. If you are no longer logged in to the site, click the **Log in** link in the upper left to log in.



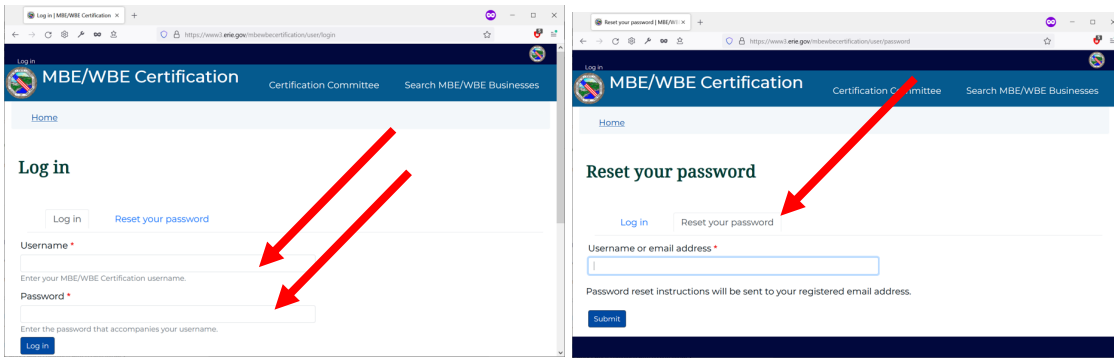
[Instructions for using this system for certification](#)

## Request Account

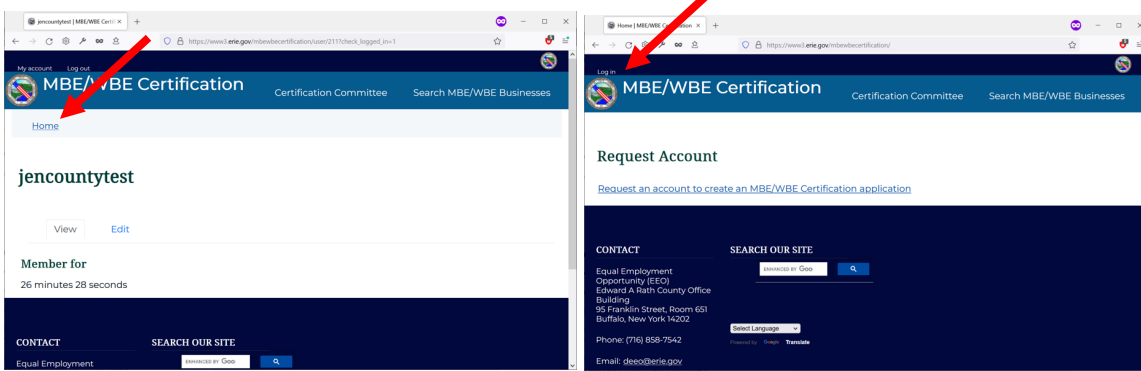
To submit an MBE/WBE Certification application, you must first request an account:

[Request an account to create an MBE/WBE Certification application](#)

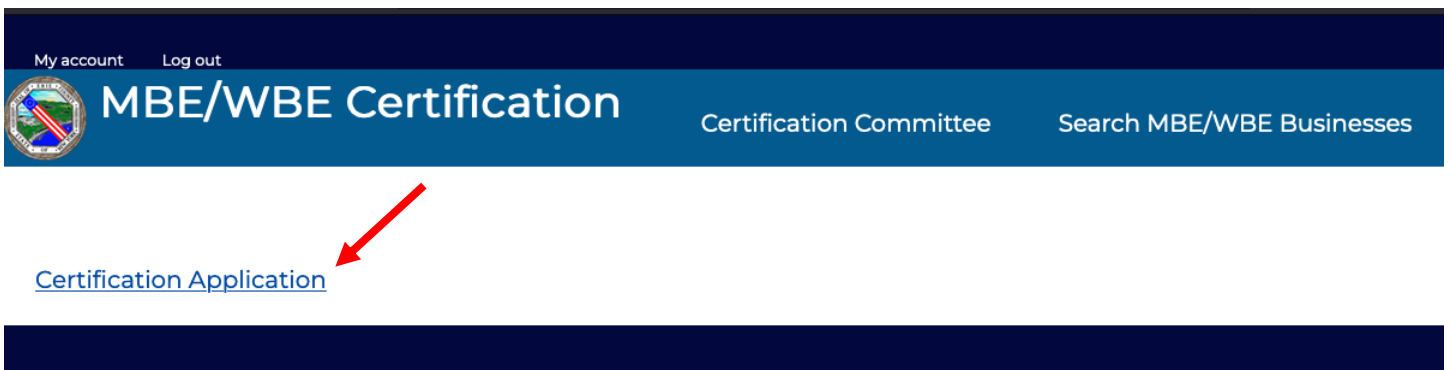
Fill in your username and password. If you've forgotten your password, this is where you can reset it with the **Reset your password** link. Be sure to use the email address you signed up with or the username that was assigned to you.



When you log in, you're on your user profile screen. Click the **Home** link to return to the main page. If the Log in option is still showing even after you've logged in, refresh your browser window and you should be logged in.



Back on the home page, you will now have a link to create an application. Click the **Certification Application** link to begin the application process.



There are 9 pages to the Certification form. ALL FIELDS ARE REQUIRED. You must complete all fields in order to advance to the next page/step.

[Home](#)

## Certification Application



Do not leave any spaces blank on the application. If a question is not applicable to your business, insert "N/A" in the space provided for your answer.

There is a **Save Draft** button at the bottom of each page. You may use this to save your progress or finish over multiple sessions. When you come back to the form, you will see a note to complete the remaining portions. **A form is not submitted or considered complete until all fields are entered and you get a message and email saying that your application was submitted.**

[Save Draft](#) [Next Page >](#)

A partially-completed form was found. Please complete the remaining portions.

Some fields allow more than one line to be entered. To add more lines, use the Add button under that section.

2. Name & Position of all person(s) with ownership interest \*

(Check all applicable. If no positions are held, state "none."  
\*\*For Group Codes, above.)

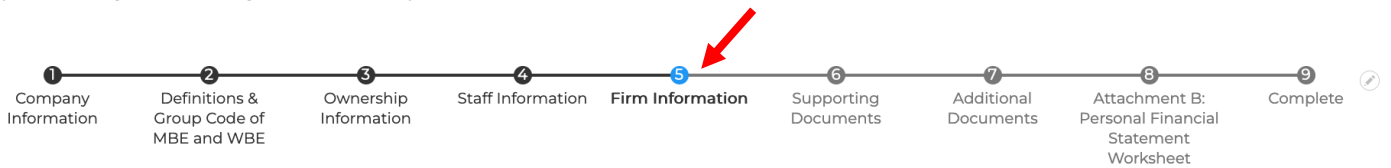
[Show row weights](#)

	Name	Position	Group Code	% Owned	Gender	US Citizen/Permanent Resident Alien	
+	<input type="text" value="Oratione"/>	<input type="text" value="Oratione"/>	<input type="text" value="Loremipsum"/>	<input type="text" value="Dixisset"/>	Femi ▾	No ▾	⊕ ⊖
+	<input type="text" value="Oratione"/>	<input type="text" value="Loremipsum"/>	<input type="text" value="Loremipsum"/>	<input type="text" value="Dixisset"/>	Femi ▾	No ▾	⊕ ⊖
+	<input type="text" value="Oratione"/>	<input type="text" value="Oratione"/>	<input type="text" value="Dixisset"/>	<input type="text" value="Dixisset"/>	Femi ▾	Yes ▾	⊕ ⊖
+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	- Nor ▾	- None - ▾	⊕ ⊖

[Add](#)  
1  more items

3. Are you currently involved in the bidding process or other contract/purchase order negotiations with any governmental agency, department, or authority? \*

As you navigate through the form, your place is indicated in the steps bar across the top.



19. Does this firm share the following with any other firm? If yes, please provide the other firm's name, address, and phone number. \*

1. Office Space \*

[Show row weights](#)

Other Firm Name	Address	Phone
+ Oratione	10 Main Street	098-765-4321

To attach your documentation, first combine your files for that item into one pdf file and compress that pdf file. If the file is greater than 2MB, it will not upload.

To upload your file, click the **Browse** button for that field.

1. Resumes of all principals, partners, officers, and/or key employees of the firm as per questions 2, 13, and 17. Show home address and phone number, education, training, and employment dates.

Browse... No file selected.

Combine documents into one file and compress to reduce file size.

One file only.  
2 MB limit.  
Allowed types: pdf.

This will bring up a window where you can navigate to the file on your computer. **Click** on the file you wish to upload, then click the **Open** button (double clicking on the file name will have the same effect).

Name	Size	Kind	Date Added
Ad [redacted]	540 KB	JPEG image	--
Ad [redacted]	1.4 MB	PDF Document	--
another-test-file.pdf	6 KB	PDF Document	--
application-for-certification.pdf	628 KB	PDF Document	--
Attachment-A.pdf	182 KB	PDF Document	--
Attachment-B.pdf	180 KB	PDF Document	--
country [redacted].png	87 KB	PNG image	--
d [redacted].sql	15.5 MB	SQL File	--
forms.pdf	337 KB	PDF Document	--
Test File.pdf	6 KB	PDF Document	--
test-file.pdf	6 KB	PDF Document	--
verification-form.pdf	9 KB	PDF Document	--
w [redacted].zip	6.2 MB	ZIP archive	--
w [redacted].zip	520 KB	ZIP archive	--
w [redacted].zip	779 KB	ZIP archive	--
yet-another-test-file.pdf	6 KB	PDF Document	--

Cancel Open

You will be returned to your application, with the name of the file you're attaching now showing on the screen. If it's the wrong file, hit the Remove button to delete this file and start over with the upload.

1. Resumes of all principals, partners, officers, and/or key employees of the firm as per questions 2, 13, and 17. Show home address and phone number, education, training, and employment dates.

 [yet-another-test-file.pdf](#)

Combine documents into one file and compress to reduce file size.

One file only.  
2 MB limit.  
Allowed types: pdf.

When you've completed all the fields, hit the Submit button at the bottom of the last page. *Your form will only submit if you have completed every field, as all fields are required.* Submission may take a few moments, as fields are being checked for completion and files are being uploaded, so please be patient.

Signature \*

I Agree

Date \*

07/19/1975

Social Security Number \*

.....

If you have any errors on your form, they will show up in the banner across the bottom of the page, as well as are outlined in red at the point of the error. If you click on the link in the footer error message, it'll take you directly to the error spot.

Signature \*

I Agree


Date \*

07/19/1975 

Date must be on or after 2023-01-09.

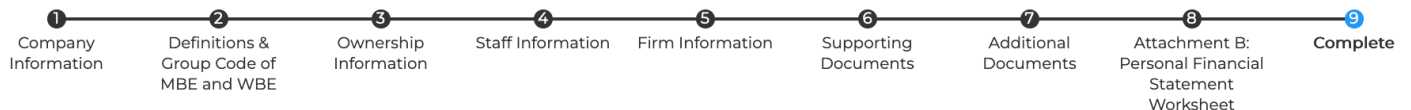
Social Security Number \*

.....

 1 error has been found:

[Date](#)

If your form submission is successful, you will receive a confirmation note on the screen, and an email (at the email address entered in the "Doing Business As" section) stating that your application was submitted.



Your application has been submitted.

[Back to form](#)

After you submit everything for review, the committee will review your application.