



New York State

Division of Service-Disabled Veterans' Business Development

Service-Disabled Veteran-Owned Business Act - Vendor Contact Form

If you are a service-disabled Veteran and own your own business, please complete and submit this form so we can contact you to determine your eligibility and send an application for certification as a New York State Service Disabled Veteran-Owned Business. Please note that simply submitting this form does not qualify you for certification.

Part I: Business Information

Name of Veteran Business Owner _____

Name of Veteran-Owned Business _____

Home Address _____

Business Address _____

County _____ Home Phone _____ Business Phone _____

Email _____ Business Website _____

Is your business verified as a federal Service-Disabled Veteran-Owned Small Business? Yes No

Is your business New York State MWBE certified? Yes No

Part II: Service-Related Information

Identify Branch of Service _____ Type of Discharge _____

VA Disability Rating Percentage (if applicable) _____

Please email this completed form to:

VeteransDevelopment@ogs.ny.gov

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Division of Service-Disabled Veterans' Business Development

part of the New York State Office of General Services



Andrew M. Cuomo
Governor
State of New York

RoAnn M. Destito
Commissioner
Office of General Services