



Diversity, Equity, & Inclusion
MWDBE / LOCAL QUESTIONNAIRE

COMPANY NAME: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

LOCAL PARTICIPATION (Check the box(es) that apply):

CONTRACT PERCENTAGE:

- Local office within 125 miles of jobsite. Location: \_\_\_\_\_ %
Not Local \_\_\_\_\_ %

MBE / WBE PARTICIPATION (Check the box(es) that apply):

- NONE or Non-Diverse \_\_\_\_\_ %
MINORITY-OWNED BUSINESS - CATEGORIES SUCH AS: \_\_\_\_\_ %
- Black / African American
- Hispanic / Latinx
- Asian-American
- Native American
- Pacific Islander
WOMAN OWNED BUSINESS \_\_\_\_\_ %
LGBTQ+ OWNED BUSINESS \_\_\_\_\_ %
VETERAN OWNED BUSINESS \_\_\_\_\_ %
SERVICE-DISABLED VETERAN OWNED BUSINESS \_\_\_\_\_ %
SMALL BUSINESS \_\_\_\_\_ %
TERO \_\_\_\_\_ %
DISADVANTAGED OWNED BUSINESS \_\_\_\_\_ %
SMALL AND EMERGING SMALL BUSINESS \_\_\_\_\_ %
OTHER \_\_\_\_\_ %
a) \_\_\_\_\_
b) \_\_\_\_\_
c) \_\_\_\_\_

I hereby certify that the above listed company and statements are true and correct, to the best of my knowledge and applicable certificate(s) are available upon request.

Company Representative Name

Title of Company Rep

Date

