The information presented on this form will be used to help market the goods/services that your company provides. If the Port Authority certifies your firm, we will add this information to our on-line directory of minority and woman-owned businesses. Other certifying agencies, Port Authority tenants and prime contractors utilize the directory and may contact you for possible contract opportunities.

Please TYPE or PRINT

1. Business Name: _____________________________________________________________

2. Business Phone: ____________________________________________________________

3. Business Email: ____________________________________________________________

4. Contact Person: ____________________________________________________________

5. Contact Phone: ____________________________________________________________

6. Contact Email: ____________________________________________________________

7. As a marketing tool, in approximately 30 words or less, and in complete sentences, describe the services that your firm provides:

________________________________________________________________________________________

________________________________________________________________________________________

8. a) Preferred Contract Size Range: Minimum = $ ___________________________

    Maximum = $ ___________________________

 b) Annual Contract Capacity: ___________________________

9. Union affiliation. Check one:

    _____ Non-Union

    _____ Union Shop – Enter local(s): ___________________________

10. Number of Full-time Personnel:

    _____ Permanent Office Staff   _____ Permanent Field Staff

11. Current Bonding Limits, if applicable

 a) Surety Company Name: __________________________________________________________

 b) Single Bonding Limit: $ ___________________________

 c) Aggregate Bonding Limit: $ ___________________________

12. a) What percentage of last year’s gross sales was earned performing prime work versus subcontracting work?

    ________ % Prime Contracts   ________ % Sub Contracts

 b) List approximate Gross Sales for last year in each major service/category provided

    (Minimum – 1, Maximum – 3):

    Service/Category 1: ____________________________________$

    Service/Category 2: ____________________________________$

    Service/Category 3: ____________________________________$