

TENANT CONSTRUCTION MBE/WBE/SDVOB PARTICIPATION PLAN

PA 3749D / 05-11

Office of Diversity & Inclusion

NOTE: The contractor is required to submit to ODI a MODIFIED PLAN, for any changes to the original plan.

TAA/MWA Project Number : _____
 Tenant Name: _____
 Prime/General Contractor Contact: _____
 Person Name & Phone #: Name: _____ Ph: _____
 Prime/General Contractor: _____
 Company Name: _____

Project Title: _____
 Location: _____
 Total Construction \$ Amount: _____
 Port Authority Contract Goals: MBE 20%, WBE 10% and SDVOB 3%

Company Name, Address, Phone Number, Contact Person Name	Indicate MBE, WBE, SDVOB	Description of work and specify "supply" and/or "install."	Anticipated date work will start and finish.	* Approximate \$ amount MBE/WBE/SDVOB Subcontract	MBE/WBE/SDVOB % of Total Contract \$ Amount
Total:					

Signature of Contractor: _____
 Print Name: _____
 Title: _____
 Date: _____

FOR ODI USE ONLY

Contract Goals: Approved Waived Rejected

Reviewed by: _____

Print Name _____ Date: _____

Distribution: Original - OFFICE OF DIVERSITY & INCLUSION:

* Please Note: supplies, equipment and materials are only credited 60%, towards the MBE/WBE/SDVOB goals. Please adjust calculations accordingly.