

## MBE/WBE COMPLIANCE EVALUATION FORM

(For Projects of \$100,000 or More)

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This form is to be completed by bidders and submitted to the Supervisor of the Planning, Design & Construction prior to the awarding of the construction contract.

The undersigned submits the following data with respect to this firm's assurance to meet the Owner's goal for MBE/WBE participation.

1. Project: \_\_\_\_\_
2. Name of General Contractor \_\_\_\_\_
3. Name of MBE/WBE Firm: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Officer: \_\_\_\_\_
4. Describe the subcontract work to be performed. (List Base Bid work and any Alternate work separately): Base Bid \_\_\_\_\_  
Alternate(s), (identify separately): \_\_\_\_\_
5. Dollar amount of contract to be subcontracted to the MBE/WBE Firm:  
Base Bid: \$ \_\_\_\_\_ Alternate(s), (identify separately): \$ \_\_\_\_\_  
\_\_\_\_\_
6. Is the proposed subcontractor listed in the Minority/Women Business Enterprise Directory maintained by the Office of Equal Opportunity, State of Missouri?  
  
Yes \_\_\_\_\_ No \_\_\_\_\_  
  
Is the proposed subcontractor certified as a MBE/WBE firm by any of the following: federal government agencies, state agencies, State of Missouri city or county government agencies?  
  
Yes \_\_\_\_\_ No \_\_\_\_\_  
  
If yes, provide details: \_\_\_\_\_  
If the answer is no to both questions above, please attach the information requested in the MBE/WBE Eligibility Determination Form.

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
By

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature