## APPLICATION FOR MINORTY BUSINESS ENTERPRISE (MBE)/WOMAN BUSINESS ENTERPRISE (WBE) REPORT Form \#CDI325 (rev. 2/16)

## NSP/HOME/CDBG PROGRAM (To Be Submitted Quarterly)

## Contractor: Project Name/Address:

Date:


Contract Date:

| MBE/WBE Contract Amount | Type of Trade | Contractor/ Subcontractor Business |  | Woman Owned Business (Yes or No) | Contractor/ <br> Subcontractor <br> Identification <br> Number (FEIN) | Contractor/Subcontractor Name and Address |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Race | Ethnic Code |  |  |  |
| \$ |  |  |  |  |  |  |
| \$ |  |  |  |  |  |  |
| \$ |  |  |  |  |  |  |
| \$ |  |  |  |  |  |  |

This report is to be filed with a NSP grantee's Completion Report when a minority business enterprise (MBE) or a women's business enterprise (WBE) is involved with the NSP activity.

MBE/WBE Contract Amount: Put in whole dollar amount of the MBE/WBE contract.
Type of Trade:

1 - New Construction
2 - Substantial Rehab
3 - Repair
4 - Service
5 - Project Management

6 - Professional
7 - Tenant Services
8 - Education/Training
9 - Architectural/Engineering Appraisal
10 - Other

Contractor/Subcontractor Business Racial Code:
A - White
F - American Indian/Alaskan Native \& White
G - Asian \& White
H - Black/African American \& White
I - American Indian/Alaskan Native \& Black/African American
J - Balance/Other

## Ethnic Code:

K - Hispanic

## Women Owned Business:

$\mathbf{Y}=\mathrm{Yes}$
L - Hasidic Jew
$\mathrm{N}=\mathrm{No}$

## Contractor Identification Number

Enter the Federal Employer Identification Number (FEIN)

## Contractor/Subcontractor Name and Address

Enter the full business name of the contractor/subcontractor; also enter the mailing address, indicating if this is a contractor or subcontractor
$\begin{array}{ll}\text { C = Contractor } & \text { Example (for a contractor): } \\ \mathbf{S}=\text { Subcontractor } & C-A B C \text { Construction, PO Box 1234, Somewhere, WI 54444-1234 }\end{array}$
This report to be submitted by the General Contractor on a Quarterly basis to:

